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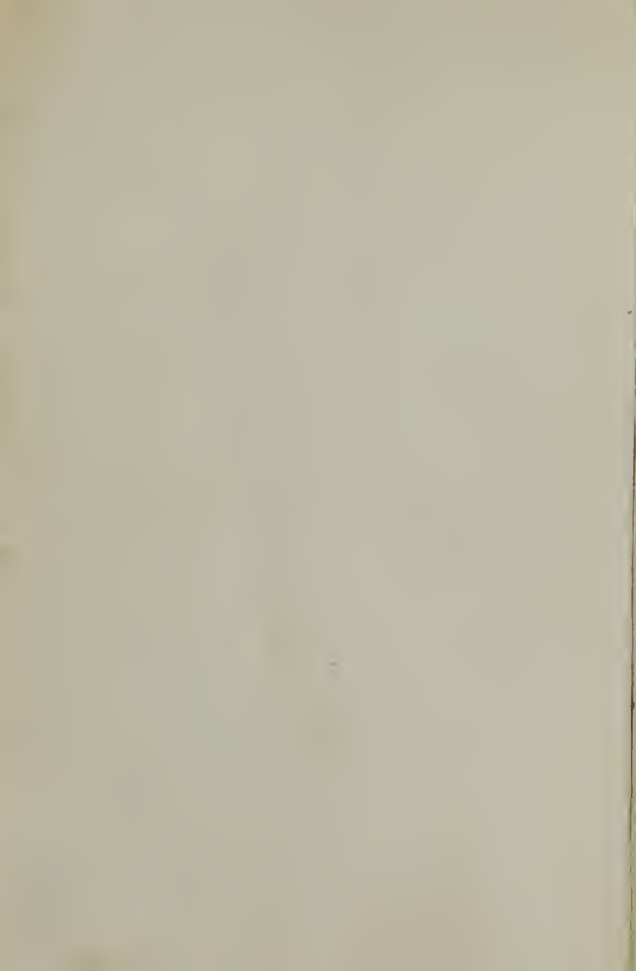


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# WOMAN'S MEDICAL GUIDE:

BEING

A COMPLETE REVIEW

OF THE

Peculiarities of the Female Constitution

AND THE

DERANGEMENTS TO WHICH IT IS SUBJECT.

WITH A DESCRIPTION OF

Simple yet Certain Means for their Cure.

ALSO,

A TREATISE ON THE

MANAGEMENT AND DISEASES OF CHILDREN,

WITH A DESCRIPTION OF A

NUMBER OF VALUABLE

MEDICINAL PLANTS AND COMPOUNDS

FOR DOMESTIC USE,

AND A GLOSSARY.

BY DR. M. K. HARD.

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## PREFACE.

Until recently all knowledge of medicine, as a subject of any practical importance, was confined to the medical profession. Indeed, it has been commonly believed that the people generally, from the nature of their pursuits and circumstances, are wholly unqualified for a rational investigation of so abstruse a science as this professes to be. In consequence of this state of things, civilized communities have, heretofore, by common consent, committed their bodies, so far as health is concerned, into the hands of a class of men whose operations have ever been veiled in inscrutable mystery; and have, without scruple, submitted to any thing which the folly or cupidity of medical monopolizers has prompted them to advise.

A change, however, is beginning to exhibit itself in relation to this subject. The people generally, are becoming, in some measure, aroused to a contemplation of their situation, and are making some effort to throw off the chains with which the Medical Priesthood has so long enslaved them.

No where have the evils resulting from this state of ignorance been more painfully apparent, than in the medical management of females; and in no department of medicine is instruction more necessary, than in the one occupied by this little volume.

We do not advocate doing away with the pursuit of medicine as a distinct profession—because we think such a profession necessary—but we do assert that the practice of medicine will never become what it should be, nor the public welfare in this respect, be properly

guarded, until the veil of mystery be removed from this science, and it becomes a matter of common investigation. Till this takes place community will continue to be a prey to the operations of men, whose only motive is gain.

The following treatise, we trust, will meet the demand for instruction in the particular department which it occupies, in such a manner as to receive the entire approbation of those for whom it is intended.

We are aware, however, that the following pages will not bear the scrutiny of critical investigation, so far as literary merit is concerned. Indeed, in looking over the different forms, as they came from the press, we found much that we were assured might be rendered more acceptable to readers of refined taste.—There are, also, some faults in the arrangement of the work—which do not, however, affect its value in any material sense.

As an apology for these errors it is only necessary to state, that the time of publication occupied but little over two months—that the whole book, with the exception of a few pages, was written during the same period—and that besides this, and the labor of correcting the proof, the author was engaged in other business which occupied a large portion of his time.

M. K. HARD.

Mount Vernon, May 10th, 1848.

## INTRODUCTION

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### CHAPTER I.

In the preparation of the following pages, our aim has been to provide for females a plain and simple means of instruction in reference to their distinctive peculiarities, whether manifested in the performance of necessary and healthy functions, or under the influence of disease.

It is well known that, heretofore, females generally have been deprived of appropriate means of instruction concerning these subjects, and that, consequently, much injury has resulted. in many instances, from neglect, inattention, or improper treatment on their part.

Especially is this true in reference to young girls, who are often suffered to grow up in entire ignorance of the menstrual evacuation, and of those principles which should govern their conduct at the period of its approach. The consequence is, the unexpected appearance of this discharge excites a degree of alarm in the mind of the individual, which, however, delicacy, the result perhaps of criminal neglect on the part of the mother to impart instruction, prevents her making known; and in the confusion which her condition produces, aided by the desire for concealment, she perhaps resorts to measures that may destroy her future health and happiness. "Many, under such circumstances, have gone into ponds, rivers, or brooks, or sought other modes of using cold water, for the purpose of washing out the stain, by which means they have taken colds that have often been productive of irreparable injury to the constitution. Convulsion fits, and incurable chronic complaints of various kinds, are the common and frequent results of this species of imprudence, which might, in all probability, have been avoided had the unhappy victim only been apprised of what she should expect, and the rules by which she ought to have been governed." It may be objected, however, that the following treatise embraces subjects that may not appropriately be communicated to unmarried females. If so, we reply that we think differently; and in all candor we ask the question, is it not bet-

ter to instruct young women in reference to all the duties and difficulties of married life, rather than compel them to enter into so important a relation, ignorant of its duties, and unapprised of its dangers? We cannot away with that feeling of fastidiousness, that sentiment of sickly modesty, that shuts out from woman all knowledge of herself, and carries her blinded through all the changes incident to her sphere; especially when we know assuredly that her ignorance will expose her to many dangers, and the mortification of many indelicacies, which she might avoid were she properly instructed.

One circumstance that influenced us to the performance of the present task, is the fact that much error prevails in reference to the treatment of female complaints, thereby occasioning serious, and in many instances, protracted and incurable difficulties. There is no necessity arising from the condition of woman's physical structure or duties, that should render her so peculiarly subject to affliction as experience demonstrates her to be. The cause may be found in the violation of natural law—in many instances in the use of improper and dangerous remedies.

We have not space to enlarge on this subject. Suffice it to say, that all *poisonous* agents commonly employed as medicines, should be rejected. So delicate is the structure of woman, and so peculiar her functions, that their use becomes eminently hurtful and dangerous. We have

accordingly recommended nothing that can do any injury. Our remedies are harmless; yet ample experience demonstrates them to be superior to any thing else known for removing those evils which they are recommended to cure.

It may be proper to remark, that we have not aimed to be thought original, only so far as we have been able to *collect* together facts which have been developed in the experience and investigations of others, and *arrange* them in such a form as to be serviceable to those for whom they are intended. We have accordingly, in many instances, adopted the sentiments, and when convenient, the language of others, aiming at all times to present facts in as plain and simple a manner as possible.

We would not, however, leave the impression, that the mode of practice contained in the following pages is recommended solely on the testimony of others. On the contrary, we have long been familiar with the application of botanic remedies, and can speak from *experience* with regard to their efficacy.

With these remarks we present our little book to the intelligent mothers and daughters of this happy country, hoping we may by this means be enabled, in some measure, to mitigate their sorrows, relieve their afflictions, and afford some light to guide in the performance of some of the most interesting and important duties belonging to their relations

## SEXUAL DISTINCTION—THE MARRIAGE INSTITUTION.

We are informed by the divine record that the work of creation terminated in the production of man—the crowning excellence in that ascending scale of being which, commencing with unorganized matter, may be traced through vegetable and animal life, each step developing new and superior characteristics, until it ends in that delicately organized, peculiarly constructed, and eminently beautiful arrangement, the “human form divine.”

Nor is it in his organized structure alone that we mark his superiority; to man, thus distinguished in his origin and physical conformation, belong numerous attributes, both of the intellect and affections, that adapt him to sources of pleasure and modes of existence more refined and exalted than belong to any other class of beings with which we are acquainted.

Among the most interesting relation belonging to human beings, are those which arise from the sexual distinction. This distinction was formed for purposes of the highest importance, and is the origin of our tenderest affections, our greatest cares, and our most exalted pleasures.

The grand consummation of the sexual relation is found in the marriage institution. The vows of hymen and the marital couch, therefore, become objects of fond expectation to the majority of mankind; while nature and revelation indicate the hymeneal union to be superior

to all earthly attachments, and require that we should sooner abandon every other temporal obligation, "than abate the ardor of our love, or recede a line from a course of inviolable fidelity to the chaste embraces and pure affections of a virtuous companion."

A condition essential to the perfect enjoyment of the hymenical privileges, is a state of mental and physical purity. To cultivate, then, virtuous affections, and to preserve those healthy conditions on which the consummation of sexual attachment depends, constitute objects of inconceivable importance to the moralist and physician, and cannot be overlooked or neglected, without danger of disastrous consequences to social peace and physical well-being.

To assist in this work is our present design. And if we shall be able to make any impressions favorable to virtue, to afford any light to assist woman in understanding her own physiological laws, or instruction to guide her amid the dangers and difficulties incident to her province and sphere, our highest object will be realized.

#### PECULIARITIES OF FEMALES.

Althoug formed upon the same apparent general model, there are peculiarities that distinguish the female from the male, which the most indifferent observer cannot fail to perceive.

In woman there is an inexpressable arrangement of features, a peculiar modification of voice, as well as peculiarities of gait, manners,

disposition, and tastes, that readily establish her identity.

The anatomical and physiological distinctions, also, are numerous and interesting. The female is not only inferior in stature, but her whole organization is much more delicately constructed—while her surface is characterized by its smoothness, elasticity, polish, and the gradual and beautiful transition between its parts.

In the female the head is comparatively small, the neck long, the shoulders narrow, the abdomen large, and the hips extended; while the muscular, circulatory, glandular, and cellular systems, as well as the secretions, and excretions, of every kind, differ from those of the male.

But a still more striking difference exists in the female organs of generation, in their construction, the functions which they perform, their liability to become deranged, and the influence which they exert over the health of the body.

These, and other peculiarities of the female, adapt her to the performance of offices, and the discharge of duties, mental and physical, not only important, but essential, involving the highest branch of parental responsibility.

Among these offices, we would mention as first in importance, the part she bears in the work of developing and sustaining the embryo offspring through all the stages of foetal life, until she presents it to the world, fully prepared to encounter the new mode of existence which awaits it.

To the mother, also, is committed, in a peculiar sense, the care of making those early impressions on the moral constitution of her offspring that shall mould them into dutiful children, virtuous companions, or useful and intelligent members of society.

How great these responsibilities; and how exalted and wide the sphere of woman's influence!

#### DESCRIPTION OF ORGANS.

For the purpose of enabling our readers to understand many terms that we shall be under the necessity of using, we will, in this section, give a brief description of the female organs of generation, and surrounding parts, with their abnormal deviations, or unhealthy conditions, &c.

These organs are of two kinds, the *external* and *internal*. The external are the *mons verenis*, the *labia pudendi*, the *clitoris*, the *nymphae*, and the *hymen*. The internal are the *vagina*, the *uterus*, the *fallopian tubes*, and the *ovaries*.

The MONS VERENIS is that fatty muscular prominence, situated at the lower part of the abdomen, immediately over the *os pubis*, or share bone. This after puberty is covered with hair as in males.

*Abnormal Deviations.*—"Occasionally the growth of hair is excessive. This part is also the seat of cutaneous eruptions and abscess."

The LABIA PUDENDI, *labia externa*, (external lips,) commence at the mons verenis and extend

downward and backward on both sides of the external orifice, until they unite within an inch or more of the anus. The place of their union below is called the *fourchette*, or fork. They are thick and full above, but gradually diminish in size until they reach their lower angle. The space between this angle and the anus is called the *perineum*.

*Abnormal Deviations.*—"These are chiefly, 1st, excessive growth attended with mechanical inconvenience; 2d, inflammation and abscess; 3d, cutaneous eruptions and pruritis, (itching;) 4th, encysted tumors, hernia, &c.

The CLITORIS is situated just below or back of the upper angle of the labia, and upon the os pubis. It is a round, fleshy, and oblong body, bearing some resemblance in its construction to the male penis. This is supposed to be the principal seat of pleasure in coition, and capable of some degree of erection.

*Abnormal Deviations.*—This organ is sometimes the seat of inflammation, malignant diseases, &c. It may also be increased in size by disease, or may vary from malformation.

The NYMPHÆ, or *labia minora*, resemble the labia externa. They commence at the clitoris, and extend downward and backward, within the labia, nearly half their length, "gradually diminishing until they disappear."

*Abnormal Deviations.*—The nymphæ are sometimes subject to inflammation, and occasionally they are much enlarged from birth, or as the result of disease.

The **HYMEN** is a membrane situated a short distance within the labia, and stretched across the passage ; generally with an aperture in the center, or at one side, for the passage of the menstrual fluid. This membrane is necessarily ruptured, if not before, at the first act of sexual intercourse; hence its existence has been denominated the test of virginity. This however is not a certain test ; since many causes tend to rupture it before puberty. Perhaps in a majority of instances the most chaste and virtuous females go to the marriage bed without this token.

*Abnormal Deviations.*—The hymen may be imperforate, or without an aperture ; thus entirely closing up the vagina and preventing the passage of the menstrual fluid, &c. In other instances the membrane is so thick and strong as to prevent sexual intercourse. These difficulties are easily overcome by a safe and simple operation, which may be performed by a female friend, or by the individual herself. All that is necessary is to make an opening, or incision with a knife, or some other appropriate instrument—using care not to wound the adjacent parts. The best way is to make a *crucial* incision, that is, two incisions extending from side to side, and crossing each other in the form of a cross.

The **URETHRA**, or passage from the bladder, is situated under the os pubis and is about an inch and a half in length. Its mouth, which forms a

slight elevation, and is called the *meatus urinaris*, is situated immediately below or behind the clitoris, and just above the vaginal orifice. This position is necessary to be understood whenever it becomes necessary to introduce a catheter for the purpose of drawing off the urine.

The VAGINA is the passage leading from the external orifice to the womb. Its direction is upward and backward. Its position is between the urethra and bladder in front, and the rectum or lower portion of the intestines behind. It is small in virgins, but may be greatly distended, and resume its natural shape. By passing up the finger, the *os tincoz*, *os uteri*, or mouth of the womb, may be felt projecting down into the vagina.

*Abnormal Deviations* — Sometimes the vaginal canal is extremely short, or narrow, rendering sexual intercourse painful, difficult, or impossible. It has been found entirely closed up, or wanting. It is also occasionally found closed with an imperforate hymen, or a membrane higher up. When this canal is too short, there is no remedy. When too narrow, it may gradually be enlarged by using a bougie, or some similar instrument; and when wanting, the knife of the surgeon may form an artificial passage. The vagina is also the seat of inflammation and malignant diseases, and occasionally protrudes in consequence of extreme relaxation.

The UTERUS is situated in the pelvis, just above the vagina. It resembles a pear with the neck, or narrow part downward. In adult females who have not borne children, it is about two inches and a half in length, and one inch and a half in breadth at the widest part.

*Abnormal Deviations.*—"The uterus may be altogether wanting; several such cases are on record; 2d, the canal of the *cervix*, (neck of the womb,) may be extremely narrow throughout, or it may be the seat of stricture; 3d, it may be closed, either by the union of its sides or by the mucus membrane being continued over the os uteri; 4th, the uterus may be malformed and is the seat of many diseases."

The FALLOPIAN TUBES are about four inches in length, and proceed in an extended and curved direction, until they terminate in a kind of fringed process called *fimbriae*, nearly in contact with the ovaries. Internally they open obliquely into the uterus, externally they open into the abdomen.

*Abnormal Deviations.*—These tubes, one or both, may be impervious from disease, or as a congenital malformation. When both are closed barrenness is the result. They are also subject to inflammation and other diseases.

The OVARIES are situated on each side of the womb, and are the essential organs of generation in the female, producing the *seed* in woman, and hence are called female testicles. They are small, roundish shaped bodies, about the size of small nutmegs.

*Abnormal Deviations.*—One, or both, of the ovaries may be wanting or disorganized. They may also be the seat of inflammation, dropsy, malignant diseases, &c.

The PELVIS is the bony rim which surrounds the lower part of the body, beneath the walls of the abdomen. “In adults it consists of only three principal bones, the back or posterior part called the *sacrum*, and the two haunch, side, and share bones, the back and high parts of which are called *ossa innominata*, (nameless bones,) the sides are called *ossa illa*, (iliac bones,) and their anterior or front ends the *ossa pubes*, (pubic bones.) To the lower part of the sacrum are attached several little movable bones called *os coccyx* or coccygis; and from the upper and front part is a projection called the promontory of the sacrum.”

“The pelvis is divided into two regions, called the superior and inferior straits. This division, however, is only imaginary, but seems necessary in order to describe the cavity with the most ease and accuracy. The superior or upper region is of an oval shape, being longest from hip to hip, and narrowest from pubes to sacrum, that is from front to back. It is in this region that the womb lies when unimpregnated, and also during the first months of pregnancy.

“The inferior or lower region of the pelvis on the contrary, affords more room from front to rear, that is, from the pubes to the sacrum. This peculiar form of the pelvis is very imper-

tant to recollect, in order to understand the mechanism of child-birth."

*Abnormal Deviations.*—"The pelvis is sometimes distorted, as it is called, that is, grown out of its natural or proper shape, which gives rise to difficult labors. The pelvis is said to be deformed when it is either above or below the common size, though the difficulties which arise from its deformity are principally caused by its too small size, in which case it does not admit of a free passage of the child's head. In most instances, however, this inconvenience is overcome by time and patience. Indeed it is wonderfully surprising how nature is adapted to accommodate herself to every difficulty."

For a more particular description of pelvic deformities the reader is referred to larger works, that treat upon the subject of midwifery. We would remark, however, that a case of deformity so great as to prevent the safe delivery of the child, hardly ever occurs in this country.—For other definitions the reader is referred to the Glossary.

#### MARRIAGEABLE AGE.

"The period of life most suitable for matrimonial alliances, it may be somewhat difficult to adjust and determine, with a precision capable of affording general satisfaction. The growth of the body, the development of its organic structure and sexual functions is always gradual. Some acquire a much earlier maturity than

others. \* \* \* "No one should indulge an anxious desire for the nuptial bed, until the sexual organs be completely developed: they should have acquired a perfect maturity, or full capacity for their respective functions; not merely a capability of procreating, but a full adaptation of all the parts to sustain all consequences without injury. On the part of females, not only the generative faculty is indispensable, unless some special cause of sterility exist, and a capability of enduring the process of utero-gestation without injury to the system, or the impairing of the general health.

"When the genital organs are prematurely urged into exercise by onanism, illicit commerce with lascivious *demireps*, or too early a rush into the bonds of matrimony, all the powers of virility will be subject to an early blight.

\* \* \* "While we thus candidly suggest the impropriety of a premature adventure in Hymen's silken groves, and admonish unwary youth, presenting for their solemn consideration a formidable objection against a wanton indulgence of the premature solicitations of licentious passions to the high and honorable privileges of wedlock, let no heedless, unreflecting mind turn away offended at our friendly admonitions. \* \* \*

"In relation to females, should we be allowed to exercise a freedom of opinion, we would sincerely contend, that the young woman of eighteen or nineteen years of age, who has at-

quired the usual qualifications of her sex, is commonly as eligible for a companion to a person whose age and circumstances are suited to her own, as she probably ever will be.

“By early marriage, the female escapes many snares and temptations incident to her rising years. If she has given due diligence to the cultivation of her mind, her exterior charms of countenance, complexion, and general animation, will have gained their summit: All that is fascinating and lovely in a female that she ever will possess, is commonly at that interesting period fully at her command.

“If her reputation remains unsullied amidst the storms, the tumults, the dangers and disasters of this perilous world; if the holy font of virginal purity remains unsealed, unscathed by libidinous indiscretions and lecherous rapine of lascivious instruments of unrighteousness, she will have the power to command the respectful homage and affectionate consideration of the man of taste, intelligence, and honorable intentions.

“A female having gained a period of life suitable for the marriage state, under such propitious circumstances as we have named, and given her heart with her hand to him whom she has promised to treat respectfully as a husband, may indulge in some pleasing anticipations. Should conception succeed the connubial embrace, the season of gestation will pass away with far less difficulty, suffering, and danger,

than could have happened under different circumstances.

“ But there are still further advantages resulting from such a favorable combination of incidents. In all ordinary cases, when the hour of parturition arrives, if she has been discreetly managed, the proverbial sorrows of childbed will be half removed.

“ Another circumstance worthy of deep consideration is, when a child is born of a young and healthful mother, she may more rationally and hopefully, notwithstanding the precarious tenure of human life, anticipate the day when she may, possibly, see the son of her womb a man of intelligence, reputable and influential in society, a pillar in church and state.

“ If she has given birth to a daughter, she has an animating prospect, that under the smiles of a munificent Providence, she may see her climb the hill of life, up to womanhood—that she may see the blushing rose of fascinating beauty bloom on the lovely face of her delicate offspring, before all the sweet charms that decorate her own fair cheek shall be nipt by the frosty hand of time, or tarnished with the blighting influence of hoary-headed years.

“ This daughter, born of a young, intelligent mother, may find in her a companion and valuable associate. She will mingle in the same convivial circles, partake the benefit of her judicious examples; which, added to her virtuous and interesting precepts, will be to the girl an arm of powerful protection.

"In vain the spoiler makes his assault. The fair charter of her virgin purity, unsoiled by indiscretion, blear-eyed jealousy cannot raise the fever of suspicion.

Without any laborious effort to maintain her authority, we behold this mother, by a law as natural as that which regulates the onward passage of all rivers to their mother ocean, begin while living to command her household; the influence of which will be perpetuated to successive generations! \* \* \*

"One remark more on early marriages, and we pass along. We know there are some

"Marble forms,  
That no melting passion warms."

Their stoic minds may not feel the force of our arguments, but to the humane, generous, ingenuous, and benevolent, we shall make the appeal. By an early association with the man of her choice, in the holy bands of wedlock, the amorous, lovely, fascinating girl escapes a long train of disease, that in afflictive forms are incident to the necessary concealment and suppression of excitements unindulged; propensities which, in no other circumstances, can be innocently gratified. These are not the

"Logs of green wood that quench the seals,  
Who marry just like stoic souls,  
With ozers for their bands."—*Hersey*.

#### CAUSES OF FEMALE DERANGEMENT.

That females are peculiarly subject to disease, is a fact which common observation de-

monstrates. Yet why it should be so, is a matter of some speculation. All admit that modern times are characterized by the greater prevalence and potency of causes which produce debility and decay; yet the question recurs, Why are females more subject to those causes than are males?

To understand this subject fully, it should be remembered, in the first place, that the female frame contains certain organs, made for special purposes, whose derangements, when they become subject to disease, are superadded to the complaints common to both sexes.

It should be borne in mind, also; that those organs have a very intimate connexion with nearly every vital process, and that consequently their derangement cannot fail to disturb the healthy performance of the vital functions. Hence the frequently unsuspected cause of the general ill health to which many females are subject.

And not only are the derangements, primarily implicating the organs peculiar to females, the sources of disturbance among the vital functions, affecting in their consequences the condition of the stomach, liver, lungs, &c.; but whatever disturbs the general health, cannot fail to affect them, rendering their action unhealthy, and establishing sources of mutual derangement.

We should also recollect that, although the female frame is so constituted by its wise Creator as to be able to sustain itself without injury,

under the performance of all the duties peculiar to her sphere, such as child-bearing, &c., yet the delicate character of its construction renders it less able to resist the influence of those artificial sources of disease which the false refinements of modern civilization have introduced among us.

For one of these sources we must look to the manner in which mothers usually clothe their daughters, commencing at the very period of their birth. "Do they not encumber their bodies with numerous bandages and oppressive clothing, while they leave the extremities almost destitute? What must be the effect of this course of conduct, but to relax and expand inordinately the pores of the body, and to contract those of the extremities, thus forcing through the former all the heat and moisture that ought to be secreted from the whole surface, and giving to the atmosphere the power to impede the circulation of heat and moisture through the extremities, which impediment or obstruction must necessarily reduce their temperature? The arteries of the lower extremities being contracted by exposure, those of the chest and head are proportionably distended by the pressure of the blood that is thus forced into them, and the sensation produced by this pressure is called "fullness of the head," or cerebral congestion; while the distended blood vessels necessarily press upon the nerves, and disturb the uniformity of their action, producing sometimes a confusion of their operations, which is termed delirium.

Here, also, we have the origin of many cold feet and hands, flushed countenances, &c. ; \* \* and thus is laid the foundation of disease, which follows many to their graves.

“If asked how I would have the extremities to be dressed, I answer, let thick flannel drawers and woolen stockings in winter, and cotton in summer, be worn next the skin ; let the body be clothed so loosely, that it can easily move itself within the garments, which should be no warmer than those on the extremities.”—*Curtis' Obstetrics*, pp. 37, 38.

Another source of mischief is to be found in the use of “those modern instruments of lingering torture called corsets, stays, busks, belts,” &c., &c. These machines prevent the body from growing to its proper size, in its natural shape ; they confine and obstruct the vital organs so that they cannot perform their offices in a healthy manner, thus laying the foundation of lingering, but fatal maladies ; they also, by contracting the cavity of the chest, and the walls of the abdomen, so diminishes the space which the womb should occupy in the pregnant state, that their resistance becomes the source of abortions, miscarriages, tedious and painful delivery, and many other disagreeable consequences, which attend or follow child-bearing.

Other causes are to be found in the luxurious habits of modern times ; social customs which allow but little healthy action in the open air ; improper confinement at school ; mismanage-

ment at the time of delivery, &c., but perhaps the most efficient and usual one, is the use of improper and poisonous medicines. For generations past it has been customary, on the appearance of the slightest indisposition, to call in the doctor, who comes armed with deadly drugs to implant in the growing constitution of the delicate infant, or matured system of the adult, the seeds of decay and dissolution. How could it be otherwise than that the delicate frame of the female should suffer under the operation of such potent causes as these? How can we expect any thing else but that the human race will continue to deteriorate, unless they learn to abandon poisons, and come back to the use of nature's remedies?

One other cause I will mention before leaving this subject. I refer to carelessness and exposure at critical and particular periods. How many lives have been lost, and constitutions destroyed, by a degree of inattention on the part of young girls, which proper instruction might have prevented. Females should always remember that their derangements ought to receive early attention, unless they intend to peril their future health and comfort.

## CHAPTER II.

## MENSTRUATION.

This evacuation is called the *menses*, from *mensis*, a month, because it usually occurs at intervals of about four weeks. The *menses* are also termed CATAMENIA; and in common parlance a menstruous woman is said to be *unwell*, to have her *turns*, her *periods*, her *sickness*, her *uterine evacuations*, &c.

This discharge is regularly secreted from the internal surface of the womb, and resembles blood in appearance, though experiments have demonstrated that it is not blood, as it was formerly imagined to be, but an entirely different fluid.

The time of life at which menstruation commences, varies according to the temperature of the climate, constitutional peculiarities, and habits of the individual. In warm climates it makes its appearance at ages varying from eight to twelve years; in temperate climates from twelve to sixteen, and in northern latitudes from eighteen to twenty. In very cold regions it usually ceases through the winter season.

Menstruation announces the complete development of the organs of generation, termed the

period of puberty. At this period those changes are complete which constitute the perfection of female charms, and transforms her from an unattractive girl into the fascinating queen of love, and idol of man's affections.

"The quantity of fluid expended at a menstruous period differs in different individuals. With girls who precociously menstruate, the quantity is in general smaller, and the returns less regular. Climate exerts an influence upon the quantity discharged, as well as upon the period at which the evacuation shall commence. Thus in the equatorial and northern climates, it is less than in the more temperate regions."

As a general rule, females menstruate about twice as long as the period which has elapsed before its first appearance. Thus, if a female commence menstruating at eighteen, she will continue until over fifty; } those who begin at fourteen or fifteen will leave off at about forty-five; } while those in warm climates, who begin at nine, cease at about twenty-six.

The menstrual discharge usually, in a state of health, occupies from three to six days; with women who enjoy good health, its returns are regular almost to a day, rarely going beyond four weeks; though, in consequence of some derangement, it occasionally appears once a fortnight, and in others is delayed five or six weeks.

Women of indolent and luxurious habits, and those of delicate nervous constitutions, are liable

to considerable suffering during their catamenial purgation; while those of vigorous health, accustomed to active, healthy pursuits, whose food, dress, &c., are in accordance with the laws of health, will feel but slight inconvenience, unless from a diseased state of the womb itself.

Much speculation has arisen in reference to the design of the menstrual fluid. The following considerations may aid us somewhat in deciding this question. 1. All the peculiarities of females have reference to the work of reproduction. 2. This secretion never appears until the female has reached maturity. 3. It ceases during pregnancy, lactation, and old age. 4. Females who suffer under a considerable derangement of the menses, or in whom they are wanting entirely, do not conceive. From these facts we conclude that the menstrual fluid is designed for the growth and nourishment of offspring, that the elements which compose it are first employed to assist in the growth of the female until she arrive at maturity; that when no longer needed for that purpose, it is periodically discharged, until made to administer to the purposes of reproduction; that having subserved this, its great purpose, it afterward ceases in consequence of the diminished energies produced by old age, or else its constituents are employed to sustain the enervated powers of declining life.

#### CESSATION OF THE MENSES.

At about forty-five years of age, as before re-

marked, women in this climate cease menstruating. There are, however, exceptions to this rule; for it sometimes happens that persons of delicate health and indolent habits have this function arrested at an earlier age; while in other instances, females of vigorous health and active pursuits have been known to menstruate till over sixty, and even later in life.

The time of life at which the menses cease flowing, has always been regarded as a critical period, and its approach is generally anticipated with feelings of interest and anxiety. The sudden arrest of any customary evacuation, however small, is sufficient to disorder the whole frame, and often to destroy life itself. The cessation of the menses, however, takes place according to an established law of nature, and it is only when accidental causes interrupt or obstruct other functions bearing some relation to this change, that any danger need be apprehended.

No one can anticipate the precise symptoms which may attend the decline of the uterine discharge. Sometimes it produces hardly any perceptible change in the health and feelings; sometimes the constitution suffers, and not unfrequently the change is decidedly beneficial.

Usually, as this period approaches, menstruation becomes quite irregular. It not only is sometimes greatly less, and again much more in quantity than usual, but it also is occasionally obstructed for some months, and then, perhaps,

comes oftener than it ought to do. In some cases the quantity gradually diminishes, without producing any other change, until it finally disappears. The occasional obstruction, before the final cessation of the discharge, is frequently accompanied with sickness, and swelling of the belly from wind, which occasions married women to imagine themselves pregnant.

At this period of life, nothing will so effectually secure females against injuries which may arise from deviations of the menstrual discharge, as regularity in eating and drinking; in exercise and rest, and in the proper government of all the passions. Extremes of every kind should be avoided, and the utmost care must be taken to preserve the *general health* unimpaired.

If, however, the general health suffers, the individual should resort to such means as will restore it. The bowels should be kept regular; the stomach and digestion strengthened with tonic bitters; the skin cleansed with washes, and toned up with the shower bath, friction, &c.; and the circulation kept free by the use of composition tea, and bathing the feet in warm water, &c.; and if need be, the course of medicine, or vapor bath, should be occasionally employed. If the impaired health seems to arise from either an increased or diminished quantity of the menstrual fluid, the treatment recommended under the heads of profuse or suppressed menstruation, must be adopted according as either of these conditions may prevail.

## DISORDERS OF MENSTRUATION.

“These functional derangements are divided into three classes: 1, Amenorrhœa; 2, Dysmenorrhœa, or difficult menstruation; 3, Menorrhagia, or recessive menstruation.”

## AMERNORRHŒA.

There are two kinds of amenorrhœa. In the first, which is called *retention of the menses*, the female reaches the proper age when she ought to menstruate, yet no discharge appears. The other is called *suppression of the menses*. In this case the menstrual discharge, from some cause, is suppressed in persons who have previously menstruated. We will notice each of these complaints separately.

RETENTION OF THE MENSES. (*Emansio Mensium.*)

As before remarked, in this complaint the menses do not appear, although the proper time to expect them has arrived, and the usual symptoms of menstruation are exhibited.

It is not, however, to be supposed, because a female has reached the age at which we might expect her to menstruate, without the discharge appearing, that she therefore is in a condition of disease, or needs attention, unless the common symptoms of menstruation are present, or the general health suffers. There are instances mentioned of females who began to menstruate late in life, and of others who never had this

evacuation while the health remained good.

But "after girls have arrived at that age at which the menses commonly appear, and their breasts have become enlarged, with other signs of puberty; and have also the ordinary symptoms which commonly precede this discharge, such as pains in the back, hips, and loins; sensation of weight, fullness, and heat in the pelvis or lower part of the abdomen, attended sometimes with a bearing down, measures should then be taken to facilitate the discharge. There will also often be headache, loss of appetite, weakness of the limbs, and a paleness which seems of a peculiar kind, with a sinking of the spirits, loss of vigor, hysterical affections, and other derangements of the general health. These symptoms usually occur periodically for a time, but sooner or later end in protracted ill health."

The foregoing is a description of *simple amenorrhœa*, or that form of the disease in which there is a complete development of the sexual organs, and the signs of puberty are present; yet the individual does not menstruate.

This complaint may arise from any cause which produces a diminution of vital energy, or obstructs its natural action. Among these causes may be named an idle or sedentary life, luxurious living, fashionable habits, dress, &c.; suppressed perspiration, carelessness, exposure to cold, going with damp or cold feet, &c.

## TREATMENT.

In the treatment of simple amenorrhœa, our principal reliance must be placed upon the use of such means as have a tendency to invigorate the system, and produce general health. For this purpose, our first resort, in difficult cases, must be the *course of medicine*, repeated according to the exigencies of the case. In the mean time the digestive powers should be supported by the daily use of *tonic bitters*, or composition tea, and the bowels kept regular by the use of injections, or vegetable physic in mild doses.

In addition to the above, *emmenagogues* may be used with advantage at times when the symptoms indicate an effort to menstruate. A highly valuable medicine of this class is found in the *emmenagogue pills*, or emmenagogue syrup. The *black cohosh*, motherwort, madder, tansy, or coltsfoot, &c., in decoction, may be used as substitutes for the pills. In difficult cases these medicines may be continued, in somewhat smaller doses, during the intervals between the times when the menstrual evacuation might be expected.

*Stimulating injections* to the vagina or rectum, by their tendency to call the blood to those parts, are also of considerable service in this disease. Composition tea, or nearly any warm fluid, with the addition of a small quantity of cayenne or gum myrrh, may be used for this purpose.

In mild cases the course of medicine may be

emitted, and the other parts of the treatment employed. In all instances the object will be facilitated by taking exercise in the open air, the use of the flesh brush, alkaline washes, &c.

The foregoing treatment, if perseveringly applied, will not fail to effect a cure. Our own experience warrants us in giving this assurance. We know it to be infinitely superior to the allopathic routine of bleeding, purging, starving, cupping, leeching, and poisoning with ergot, iodine, strychnine, &c.

Besides this form of amenorrhoea, the menses are occasionally prevented or obstructed by some congenital malformation. For instance, the ovaries may be wanting, in which case there is no effort to menstruate at all. In some instances the uterus has been wanting or defective; and in these cases there was an effort to menstruate every month, but no discharge. These defects of course cannot be remedied. In other instances the neck of the womb may be closed, the *os uteri* impervious, the vagina absent, its sides adherent, or its orifices closed with a false membrane, imperforate hymen, &c., in consequence of which, the fluid which is secreted, instead of being discharged, is retained in the cavity of the womb, causing an enlargement of the abdomen, and other unpleasant symptoms.

In all these cases, excepting where the hymen is imperforate, or when a false membrane exists, the aid of the surgeon will be necessary.

There is another form of retention of the

menses, in which there is a secretion from the uterus, accompanied with the usual symptoms of menstruation, yet the "product is a white, colorless fluid, and so far not the menses;" although this discharge frequently occurs as no immediate precursor of the genuine menstrual fluid, into which it becomes changed. It is only where this change does not occur, after two or three monthly periods, that medical interference need be solicited.

The treatment in this case should consist of the use of tonics, composition tea, the vapor bath, laxatives or injections, if the bowels are costive, or if necessary, the course of medicine.

#### SUPPRESSION OF THE MENSES. (*Suppressio Mensium*.)

This derangement of the menses usually occurs as the consequence of sudden cold caught during their flow, or as the effect of some violent mental emotion, bodily shock, fear, &c. Sometimes, however, it proceeds from cold taken before the monthly period, and occasionally it results from general debility or disease.

The amount of disturbance consequent upon a sudden arrest of the menses, varies considerably in different instances. Usually there are present febrile symptoms, headache, and pains in the back and bowels. Sometimes a local inflammation of some part, the lungs, brain, bowels, or uterus, for instance, or derangements of the senses, paralysis, apoplexy, hysterics, neuralgia, imperfect vision, &c., result from sudden

suppression. When the suppression is caused by cold taken in the intervals between menstruating, or when it results from general debility or disease, these symptoms are milder and more gradually developed. This disease, also, not unfrequently assumes a protracted and chronic form, and involves with it many other difficulties, as dyspepsia, consumption, liver complaints, &c.

This kind of suppression may be distinguished from pregnancy by the absence of the usual signs of pregnancy. This may be important to be known in many cases, since that class of medicines employed in this complaint, whose action is specifically upon the uterus, would be improper when the individual is pregnant.

In the recent form of this disease, when the menses are suddenly stopped from catching cold, &c., it will not require any very difficult treatment to restore them.

In such cases it would be best to have immediate recourse to the vapor or hip bath, bathing the feet in warm water, warm fomentations to the lower part of the abdomen, the use of such warm teas as are calculated to promote sweating, as composition, sage, or pennyroyal, and in connection with them, black cohosh, or madder tea. Should this plan fail, or should the symptoms be violent, with considerable fever, headache, &c., the course of medicine should be resorted to at once, and followed with injections or vegetable pills to move the bowels, and the tea of black cohosh or madder as recommended above.

In protracted cases, where the disease has assumed the chronic form, and the general health becomes permanently impaired, it will be necessary to pursue a more thorough and persevering treatment. Composition tea, the Cayenne or Stomach pills, and Tonic Bitters, should be taken alternately two or three times each day, and occasionally a mild dose of the vegetable pills.

Besides the above, emetics of lobelia and the vapor bath should be employed every few days according to circumstances, and as symptoms of an approaching menstrual period appear, the emmenagogue pills, or syrup; or black cohosh, madder, or motherwort tea, should be used freely. Stimulating injections also, to the vagina or rectum, as recommended in retention of the menses, would be highly beneficial.

Other symptoms also, marking a sympathetic influence of this obstruction over other functions, may occasionally demand our attention. Should evidences of nervous derangement exist, the nervine tincture, or a tea made of sculcap and lady's slipper, separately or combined, may be used freely. If the lungs are affected use one of the preparations recommended for the lungs in the latter part of this book.

This course if continued with perseverance will hardly ever fail in the most obstinate cases. We have treated persons who had labored under obstructed menstruation for years, where constitutional derangement was strongly marked, and hope only pointed to a premature grave

as the end of present sufferings—and have seen, after the lapse of a few weeks, or months, the flush of health again mantle the cheek, and the vigor and beauty of former days return with undiminished power.

VICARIOUS MENSTRUATION.—“This is a very curious deviation from normal menstruation, and seems a provision for, in some degree mitigating the constitutional effects of suppressed menstruation by substituting a similar discharge from some other part. It is recorded to have taken place from the nostrils, eyes, ears, gums, lungs, stomach, anus, bladder, nipples, the ends of the fingers and toes, from the stump of an amputated limb, from ulcers, from varicose tumors, and from the surface of the skin generally. The more extensive mucus membranes are, however, most frequently the seat of this discharge. It appears to be sometimes blood; in others, it has the characters of catamenial fluid, being dark colored, thin, and not coagulable. The repetition of this discharge may occur at the regular period, or it may intermit; and it does not appear that any serious result follows, even when delicate organs are the seat of it. Sooner or later the uterus resumes its functions, and the attack ceases.”—*Churchill.*

*Treatment.*—After this discharge occurs it would be proper to have recourse at once to the course of medicine, and other means that are designed to remove obstructions, equalize the

circulation, and increase sweating—as diaphoretic teas, cayenne tea, bathing the feet in warm water, lying in bed with a steaming brick placed to the feet, &c. During the intervals it should be treated as simple amenorrhœa, and when symptoms of an approaching menstrual period appear, emmenagogues, as before recommended, should be used.

PAINFUL, OR DIFFICULT MENSTRUATION—(*Dysmenorrhœa.*)

"This form of abnormal menstruation consists of severe pain in the secretion or emission of the discharge, which may be scanty, profuse, or about the usual amount. The attack is occasionally confined to one or two periods, but more frequently lasts for a longer time and sometimes for many years."

The symptoms attending this species of derangement are not precisely alike in all cases. Usually as the menstrual period approaches, the individual experiences a degree of restlessness, rigors, flushes of heat, and head ache. These are followed by severe pains in the back, lower part of the belly, thighs, &c.

Connected with the menstrual discharge there are frequently expelled masses of clotted blood, or a kind of membrane composed of plastic lymph, either in shreds or in the shape of the uterine cavity which it lines. These in their passage occasion pains similar to those which accompany labor

In some cases, also, a considerable degree of fever, suppression of urine, colic pains, spasms of the stomach, or delirium supervene. Occasionally the breasts, in consequence of their sympathetic connection with the uterus, become swelled and painful; while, in many instances, the whole period of menstruation is attended with head ache, nausea, vomiting, and many other disagreeable symptoms.

This disease is generally thought to be owing to a weak action of the uterine vessels, or to a spasmodic condition of the extreme vessels, and arises from a variety of causes, as the use of poisonous medicines, catching cold, &c.

TREATMENT.—There is a two fold object to be had in view in treating this complaint; first, to mitigate the pain during an attack; and secondly, to prevent its return by the use of proper remedies during an interval. To accomplish the first object, the individual may use the hip bath, apply warm fomentations to the abdomen, sit over a vessel of steaming herbs, bathe the feet in warm water, or lie in bed with steaming bricks placed to feet, belly, and back. She should, in the mean time, drink freely of a tea made of the anodyne powders, tansy and cayenne, or composition with the addition of scull cap and as much lobelia as can be used without exciting disagreeable nausea; or if these articles cannot be had a substitute may be found in pennyroyal, ginger, or tansy tea. The tansy is highly recommended. In severe cases it would

be best to administer a course of medicine on the first appearance of any symptoms of the menses; but do not use opium, in any form, to allay pain. It may give present relief, in some measure, but will, in the end, increase the difficulty.

The second object may be accomplished by the application, during the intervals between the menses, of such means as are designed to impart strength, remove obstructions, and allay general and local irritability. Here, also, the most important indications are met by the *course of medicine*. This should be preceded by a free use, for a day or two, of composition or cayenne tea, and repeated every few days.

In addition to this some attention to the bowels may be necessary. If they require attention, the individual may use enemas, or vegetable physic in laxative doses. Active purging should be avoided. She should also take, before each meal, three or four of the compound cayenne pills; and twice a day, morning and night, she may take a tea-spoonful of a powder formed of equal parts of unicorn, blue cohosh, and partridge berry, made stimulating with cayenne. This powder may be made into tea or taken in substance. Either of those articles may be beneficially employed alone, if the whole cannot be obtained.

When the next menstrual period approaches, it should be preceded two or three days, by the use, each night, of the hip bath, diaphoretic

teas, and injections containing a small portion of tincture of myrrh, to the vagina. This is an obstinate complaint, yet perseverance in this plan of treatment will usually overcome all difficulties and effect a cure.

PROFUSE MENSTRUATION.

(*Menorrhagia*.)

This term is applied to an increase in the monthly evacuations, which may happen in various ways, as follows:—the menses may occur too frequently, in too large quantities, or at unusual periods, as during pregnancy and suckling.

There are three varieties of this disease, which may be readily distinguished from each other, yet requiring the same general treatment varying as particular conditions may indicate, and energetically applied according to the severity of the symptoms.

In the first, the menstrual fluid is of usual quality, unaccompanied with blood. Sometimes it commences with a violent discharge, and then ceases, perhaps for hours; after which it recurs again. This state may continue during the usual period of menstruation. At other times the evacuation goes on regularly, but continues too long, varying from ten days, to two or three weeks. In other cases the quantity each time may not be excessive, but the discharge may return too frequently.

“The second variety differs from the first in the discharge of blood which accompanies the

secretion. The progress of this disorder is gradual; one or two small clots appearing at first, then an intermission, and a more copious recurrence. After sometime the discharge of blood may be considerable, so as of these varieties to produce, if internal examination detect, in the womb, any departure from its usual condition during menstruation.

The third variety of menorrhagia differs from the others in the fact that it occurs much later in life—usually not until the patient is forty years of age—is more profuse, &c.; but more particularly in the change in the relations and conditions of the uterus. If an examination be made per vaginum, the os uteri will be found lower than common in the pelvis, and inclined backward towards the sacrum: the cervix is generally swollen; while the upper part of the womb is thrown forward upon the bladder, occasioning a difficulty of passing urine, which is always present in this complaint.

Increased menstrual discharge is more frequently witnessed among married ladies than virgins, and the symptoms vary according to the severity or continuance of the complaint. Usually there is experienced more or less pain in the back and belly, resembling those attending child birth, and as the complaint advances, all the effects of debility consequent upon such a reducing discharge are apparent. The appetite fails, the individual complains of loss of strength

weakness across the loins and hips, giddiness, pain in the left side, severe headache; and in some cases diarrhœa, general dropsy, nervous symptoms, and epilepsy attend the general disturbance.

Among the causes of this complaint may be enumerated cold, repeated child-bearing, over suckling, excessive indulgence in sexual pleasures, poor weak diet, &c.

TREATMENT.—In the management of this complaint our curative efforts must have reference to the establishment of general strength, as well as to the restoration of tone and vigor to the parts locally implicated. These indications may be fully met by the following outline of treatment:

1. *The Course of Medicine.*—This should be administered in the beginning of the treatment, and repeated every few days according to circumstances. In severe cases, where there is considerable hemorrhage, it may be necessary to repeat it every day or two, following it with the use of cayenne tea.

2. *Astringent Tonics, Stimulants, &c.*—Between the courses, tonics combined with astringents and stimulants may be employed. They may consist of the *anodyne powders*, *astringent tonic compound*, or some similar preparation.—They should be used three or four times a day in teaspoon full doses, in substance, or made into tea. There are also many simple articles that are highly esteemed in the cure of this complaint; such as beth root, tansy, queen of—

the meadow, solomon's seal, prince's feather, and spikenard. These should be employed as above.

3. *Injections per Vaginum*.—These may consist of a decoction of some vegetable astringent, as witch hazle, sumach, beth root, cranes bill, oak bark, &c. Alum also, dissolved in water, may be used alone, or in combination with the foregoing, for the same purpose. These should be injected into the vagina with a female syringe three or four times a day.

4. *Cathartics or Enemas*.—Cathartics should be used only to an extent just sufficient to keep the bowels regular, and should consist of some one of the articles of that class recommended in this book. The better plan would be to move the bowels every morning with an injection of boneset, with the addition of a small quantity of cayenne.

The operation of this plan may be facilitated by the concurrent use of various other means, such as the warm foot bath at bed time, alkaline washes, the shower, or sponge bath, friction with the flesh brush, the application of stimulating linament over the region of the womb, to the back, extremities, &c. It should be borne in mind also, that the removal of the first cause is essential to the cure. If it proceed from over suckling, the child should be weaned, &c.

## PUTRID OR POISONOUS MENSES.

“ This state of menstruation may not be very common, yet we have seen a number of cases during our practice, and some cases of a most aggravated character. This menstruation is scanty and painful, and the fluid is thick, ropy, putrid, and of a dark brick color, possessing the property of irritating and inflaming the labia and vagina, so as to make them extremely sensitive.

“ Some time after menstruation has ceased, say from a week to ten days, more or less, a matter of a yellow cast exudes from the os uteri, possessing the same irritable properties as the menstrual fluid. It frequently continues to annoy and distress the female for months, and in some instances, for years. \* \* \*

“ The general health in these cases is much in fault, the blood humory, the stomach sour, the bowels costive, and the urine high colored and of a bad odor. We have seen some of the most protracted and aggravated cases. We have seen health once more predominate, and the organs restored to a natural and healthy state; therefore we confide much in botanic medicines.

“ This disease is accompanied with a variety of the symptoms that are connected with the last mentioned states of menstruation, but more particularly with canker in the mouth and throat. When such females conceive and bear children, the milk partakes of the same poisonous prop-

erty, reducing the infant in a few weeks to emaciation.”—*A. G. Hall.*

TREATMENT.—This should consist of thorough courses of medicine, shower and vapor baths, laxatives or injections to the bowels, the usual tonics, stimulating injections to the vagina, &c., as recommended in other forms of uterine derangement.

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## CHAPTER III.

### PREGNANCY.

Immediately after the effective intercourse of the male with the female, a series of changes commence, which ultimately issue in the formation of a new being, possessed of individual or independent life. The first step in this process is called

### GENERATION, CONCEPTION, &c.

To explain the phenomenon of conception, numerous theories have been invented. Of these “groundless hypotheses” Drelincourt mentions two hundred and sixty-two, in addition to

which, as Blumenbach remarks, "nothing is more certain than that Drelineourt's own theory, formed the two hundred and sixty-third."

For the most part, all that has been written by way of explaining the process of generation, consists of mere speculation, and consequently need not now be noticed. The best plan, and the only one which space permits, will be to state briefly some of the leading facts connected with this subject.

In the first place, then, it may be remarked that the ovaries, heretofore described, contain a number, (from ten to twenty,) of small vesicles, or ova, (eggs.) During early life these vesicles occupy the deeper parts of the ovary, but at puberty they approach the surface, and come in contact with its outer membrane. The contents of one of these vesicles constitute the contribution of the female towards the production of a new being. Again, it is well known that the testes of the male secrete a peculiar fluid called semen, which, in the act of intercourse, is projected into the vagina and uterus of the female.

It has also been demonstrated by microscopical observations that the male semen contains an immense multitude of animalculæ, called spermatozoa, that move about with considerable rapidity. These spermatozoa have been detected in the fallopian tubes, especially at their ovarian extremity, after sexual intercourse.

It has been ascertained, also, that if the fallopian tubes be rendered impermeable, (closed,) impregnation will not take place.

It has been farther ascertained that, immediately after successful intercourse, a considerable change takes place in the condition of the uterus, ovaries, and fallopian tubes. This change consists, not only in the production of great excitement, and vascular turgescence of these parts, but also in an alteration of their relations to each other. The fimbriated extremity of one of the fallopian tubes is turned to the ovary of that side and embraces it closely, over one of the vesicles.\* After a certain time, a small opening is formed in the covering of the vesicle, at the most prominent part; the vesicle bursts, and its contents, (the ovum,) enter the fallopian tube, by which they are conveyed to the uterus.

The process of conception, then, consists in the transmission of some portion of the male semen, or its spermatozoa, through the fallopian tubes, and its contact by this means with one of the vesicles, which, in this way, becomes impregnated, and the passage of the ovum back through the fallopian tube, into the uterus, where it undergoes all those changes which result in the production of a perfect living being. How much time is required in the completion of the process that ends in the deposition of the ovum in the womb, is not precisely known. It

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\* If both tubes come in contact with an ovum the result is the conception of twins; but if they attach themselves to parts of the ovaries where there are no vesicles, no conception will take place.

does not, however, probably exceed twenty days, perhaps less.

It is worthy of notice that but a small quantity of semen is necessary to conception. Neither is it necessary that it should be injected into the womb during coition. Females have become pregnant without having the hymen ruptured, consequently the semen could only have been in contact with the lower portion of the vagina. By what kind of a process the semen is transmitted through the tubes, or the ovum returned, is not yet known.

Some women have been able to decide the precise moment when conception took place, by the peculiar emotions which they experienced. Others, however, have conceived repeatedly without ever experiencing any pleasurable sensations whatever. Dr. Gooch mentions the case of a young woman who was ravished by a young man while asleep, and although she had no knowledge of the transaction, yet she became pregnant. On the other hand, many women experience the highest degree of pleasure during sexual intercourse, yet never conceive.

#### UTERO GESTATION.

Immediately after conception, a number of remarkable changes commence in the uterus, by which it is prepared for the reception and nourishment of the embryo child. It has been remarked, heretofore, that at conception the ves-

els of the uterus become congested. These enlarge gradually until they become of great size, and form an intricate net work, on the surface, and in the substance of that organ. This change takes place both in the arteries and veins of the womb. The lymphatics, also, undergo a similar development; and the nerves increase in size until they form large cords, sending off numerous branches that unite together, in different directions, thus exhibiting the appearance of a net work, like that witnessed in the blood vessels.

Besides these changes, the womb itself undergoes a gradual enlargement, by which its capacity is accommodated to the growth of the foetus. During this enlargement its fibers are loosened and separated from each other, leaving between them large interspaces, which are occupied by the enlarging blood vessels and nerves. The walls of the uterus, however, are not much diminished in thickness by its enlargement. According to some observations they increase in thickness during the first three months, after which they gradually diminish until the end of gestation.

The fundus or upper part of the womb, begins to enlarge as soon as the ovum is deposited there; and as this is developed, the body increases until the fifth month, after which the cervix, (neck of the womb,) also participates in the distention, and is drawn out and shortened by the expanding womb, until at the ninth month, it becomes wholly obliterated.

A considerable change also takes place in the *position* of the womb during pregnancy. At first it presses down into the vagina, lower than usual; after about four months it rises entirely above the brim of the pelvis, and continues to ascend until the end of the eighth month, after which it remains stationary.

Immediately after impregnation a membrane begins to form, which lines the whole internal surface of the womb. This membrane exists in all cases, after conception, whether the ovum reaches the womb, stops in the fallopian tube, or falls into the abdomen. It is called the *decidua*. Its design seems to be, in a great measure, to keep the ovum to its place and in contact with the womb. From the fact that it covers the whole inner surface of the womb, closing the fallopian tubes, it becomes necessary for the ovum, as it enters the womb, either to penetrate or push it aside. That it does the latter, is the commonly received opinion. Taking this view of the subject, it can easily be seen how it operates to retain the ovum in its proper place—only a portion of the membrane being detached at first in order to permit the ovum to pass between it and the womb. This membrane is gradually separated, as the foetus enlarges, until, at delivery, the larger part is generally expelled, a portion sometimes remaining until discharged in shreds or patches with the lochia.

If the ovum be examined after its entrance

into the womb, it will be found to consist of two membranes, one within the other, between which is contained a kind of fluid or mucus.— They are called the *chorion* and *amnion*. Within the amnion is contained a peculiar fluid called the *liquor amnii*, in which the foetus floats. This fluid which, in common parlance, is called the *waters*, is discharged by the rupturing of the membrane soon after the commencement of labor.

Within the amnion is also contained the germ of the future being which, however, does not become visible for some time, perhaps for three weeks. When the embryo\* first becomes apparent, it is a small oblong body, slightly curved, from one to three lines in length. No appearance of the limbs can be seen at this time, and the whole ovum is not larger than a filbert.

About the fifth or sixth week the embryo is five or six lines in length, and weighs from eighteen to twenty grains. The size of the head, at this time, is equal to all the rest of the body. The face is now visible but is very small: and the positions of the eyes are shown by two black dots at the sides of the face. No trace of the nose can be seen, but a large cleft occupies the place of the mouth; and the rudiments of the

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\* The germ is called by the term embryo for the first three months, or until its several parts can be distinguished, after which it is called the foetus, but the term child is not applied until after birth.

external ear make their appearance, in the form of a circular depression.

At two months the embryo is somewhat larger than a bee. The head now constitutes one third of the whole body, the arms begin to sprout, the legs appear like two roundish buds, the rudiments of the nose begin to appear, and the beginning of the eyelids may be seen.

At the end of the third month, the embryo is from two to six inches in length; the neck becomes visible, and the arms and legs appear.—Soon after all the external parts become visible, the sex apparent, and the whole body six or eight inches long, weighing about as many ounces.

At five months the length of the foetus is from eight to ten inches, the head being one-fourth of the whole. Muscular power now becomes developed, and its motions become apparent to the mother. If born at this period the child will live a few moments.

At six months the length is twelve or fourteen inches, and the head is somewhat smaller, in proportion, than before. A foetus born at this age may live several hours.

At seven months it is from fourteen to sixteen inches long, and capable of living, if born at this period. During the eighth month the increase is chiefly in breadth. At the end of the ninth month the child weighs from six to twelve pounds.

Having thus briefly noticed the progress of

conception, it may not be improper to offer a few thoughts upon the manner in which the foetus is provided with the means of its growth. The sources of nutrition are the fluids contained within the membranes, and the maternal blood, transmitted by means of the *placenta and umbilical cord*.

The *placenta*, or after-birth, is a soft, spongy body, of an oval and flattened shape, from six to ten inches in diameter, and an inch or an inch and a half in thickness, but gradually decreasing towards its edges. It is attached to some portion of the uterus, generally the fundus or upper part.

The umbilical cord, or navel string, is a twisted cylinder, extending from the placenta to the foetus, and sufficiently long to admit the child to be born without detaching the after-birth.—It consists, principally, of the umbilical vein, and the two umbilical arteries. The vein performs the office of an artery, conveying the blood from the placenta to the foetus; and the arteries do the work of veins, carrying the residual blood from the foetus to the placenta.

The placenta possesses two distinct and independent circulations, the one just described, from the placenta to the foetus, and from the foetus back to the placenta. The other from the uterus to the placenta, and from the placenta back again to the uterus. These two circulations are wholly distinct from each other, no direct communication by vessels existing between them. Some experiments, however, if to be re-

lied on, seem to contradict this statement, and prove the existence of a direct vascular communication between the mother and foetus. But whether there be such a communication or not, it is evident that the blood of the mother furnishes to the foetus is principal means of growth. The *probability* is, that the "foetus is supported and built up by a *secretion* from the blood of the mother through the membranes that separate the respective vessels; not by the blood of the mother circulated through the foetus."

## DURATION OF PREGNANCY.

What is the ordinary term of gestation, and what are the deviations from it? These are questions which demand a brief notice, while passing along.

"The first point to be settled is the ordinary term of utero-gestation, and we are met at the outset by the difficulty of obtaining accurate data. The common mode of calculation is from a fortnight after the last menstruation; and the period so fixed is corrected by the time at which quickening occurs. In many instances this proves pretty correct; in the majority, I think, it is rather overrun; and, at any rate, the uncertainty as to the period of conception, and the variation in the time of quickening, are sufficient to render the computation no more than an approximate estimate.

"Cases, however, occasionally occur, where

conception follows a single *coitus*, and if they were sufficiently numerous, they would settle the question; but they are rare. Dr. Montgomery relates the case of a lady, who went to the sea side in June, 1831, leaving her husband in town. He visited her for the first time, November 10th, and returned to town the next day. She quickened on the 29th of January, 1832, and was delivered August 17, exactly two hundred and eighty days from the time of conception.

“The deductions from such cases, and from general calculations, have led to fixing the term of gestation at ten *lunar* months, or nine calendar months and one week, or forty weeks, or two hundred and eighty days, allowing for some variation either way.”

But supposing the precise moment of conception known, are we to conclude that the actual duration of pregnancy is invariable? We know that it may be abbreviated, from various causes, and not destroy the child, but then this is not the natural course. *May it also be prolonged?* There has been much diversity of opinion on this subject—some authors contending that gestation is never protracted beyond the usual time, allowing a few days for variation.

Still there is the most satisfactory evidence that pregnancy may be protracted much beyond two hundred and eighty days, the usual time. Many cases of this kind are on record, where the circumstances leave no chance for mistake—In these cases gestation continued from

one week to a month or more beyond the usual period.

These variations, however, are not very common, and females may calculate, with sufficient accuracy for all practical purposes, the time when they may expect to be confined.

The common mode of reckoning, is by counting forty weeks, or nine months, beginning two weeks after the last menstruation or about five months from the time of quickening. The most important thing, however is to keep the female in good health, and as pregnancy advances, be prepared at all times for its termination.

#### ANOMALOUS CONCEPTIONS.

To gratify the curiosity of our readers, rather than as a matter of any great practical benefit, it is proposed to notice briefly those variations or departures from ordinary gestation which sometimes occur. The first of these is

#### SUPERFOETATION.

This term is applied to cases in which a woman, already pregnant, conceives a second time before the termination of the first pregnancy. Ancient writers were unanimous in admitting the possibility of such an occurrence. Modern authors are divided on the subject. The evidence, however, seems to be in favor of the existence of superfoetation in some instances.

“ The cases alluded to are such as the following:—1. It is not uncommon for women to be delivered of a full-grown child and a blighted ovum at the same time, and from the disparity between them, it has been assumed that the period of conception was different for each.

2. “ Again, a woman may be delivered of two living children at one birth, or within a few hours of each other, one of which may be fully developed, while the other appears immature.

3. “ Further, the same woman has given birth to twins of different color, as in the case related by Buffon, and quoted by Fodere and all recent writers on the subject, of a woman at Charleston, South Carolina, who was delivered in 1714, of twins, within a very short time of each other, the one being black, the other white. On examination, the woman confessed that on a certain day, immediately after her husband had left her, a negro entered her room, and by threatening to murder her in case of a refusal, obtained connexion with her.”

A similar case is mentioned by Dr. Mosely. “ A negro woman brought forth two children at a birth, both of a size, one of which was a negro, the other a mulatto. On being interrogated upon the cause of their dissimilitude, she said she perfectly well knew the cause of it, which was, that a white man belonging to the estate, came to her hut one morning before she was up, and she suffered his embraces almost immediately after her black husband had quitted her.”

Similar cases are mentioned by Drs. Dewees, Dunglison, and others.

4. "Lastly, cases have occurred where the birth of a mature child was succeeded, after the lapse of some months, by the birth of another. Several such cases might be cited. In the *Recueil de la Societe d'Emulation*, there is one of M. A. Bigaud, of Strasburg, æt. thirty seven, who was delivered of a lively child on the 30th of April. The lochia and milk were soon suppressed. On the 17th of September of the same year, (*i. e.*, about four and a half months after the first delivery,) she brought forth a second apparently mature and healthy child. On the death of the woman, the uterus was found to be single."

Several cases similar to the above are mentioned by different writers, in some of which five months or more elapsed between the births, both children being perfect, and of full size.

There are many difficulties in the way of admitting the existence of superfætation, yet on no other principle can the foregoing facts be satisfactorily accounted for.

#### EXTRA-UTERINE PREGNANCY.

"From certain causes, with which we are but partially acquainted, it sometimes happens that the ovum, instead of passing into the fimbriated extremity of the fallopian tube, on the bursting of the Graafian vesicle, and being thence transferred into the uterine cavity, in

the gradual manner already described, is arrested in some part of its progress, where an effort is made to supply the place of the uterus, and afford space and ~~nutriment~~ <sup>for the foetus</sup>. This, however, can only be partially successful: and the foetus ultimately perishes for want of nourishment." To this species of anomalous conception, different names have been given; as extra-uterine pregnancy, ex-fœtation, &c.

All the varieties of extra-uterine pregnancy may be reduced to the following five:

1. *Ovarian Fœtation*.—In this case the foetus is detained in the ovary. The earliest instance of this kind on record occurred in 1682.—The ovary was enlarged to the size of a hen's egg, and torn through its whole length, in consequence of the growth of the foetus, which escaped into the abdomen, where it was found in the midst of a large quantity of blood.

Another remarkable case, mentioned by a distinguished writer, occurred in the year 1829. In this instance the abdomen was found filled with blood, and the left ovarium burst open in three places, leaving the membranous sac, which contained the foetus, to protrude partially into the abdominal cavity. The foetus in this instance, was four months old. The woman died in consequence of hemorrhage, produced by the rupture of the ovarium.

2. *Tubal Fœtation*.—In this variety of anomalous conceptions the foetus is arrested in the fallopian tube, on its passage to the womb.—

Many cases are quoted of this kind, where females died under circumstances similar to those above described, in ovarian foetation.

3. *Ovario Tubal* foetation when the foetus is held in a membranous sac contained between the fallopian tubes and the ovaries.

4. *Ventral Foetation* when the ovum falls into the cavity of the abdomen.

5. *Interstitial Foetation*.— This form is the most unfrequent of the five. There is no doubt, however, that it has occurred. In these cases the foetus becomes imbedded in the walls of the womb, where it is fastened in an interspace of its fibres, before it arrives in the uterine cavity.

In all the foregoing varieties of extra-uterine pregnancy, the foetus has been known to reach maturity, and be delivered, either by the knife of the surgeon, or by rotting a hole through the walls of the abdomen—whence it was discharged piece-meal. Dr. Curtis mentions a woman who carried a foetus twenty-four months, which was discharged after a course of medicine, dead and partially wasted away. He also mentions another who had carried one as long, when he last saw her. She enjoyed tolerable health at the time; but what became of her afterwards is not known.

Besides these cases, Dr. Campbell, quoted by Churchill, details seventy-five cases in which the foetus was retained different lengths of time, varying from three months to fifty-six years—These cases afford a striking instance of the

power of the human frame, to adapt itself to new and adverse circumstances. In many instances an effort is made to get rid of the foreign body by an artificial opening; thus the foetus may be passed *picce-méal* through the abdomen, colon, rectum or vagina.

In extra-uterine pregnancy, the foetus is developed very much after the same manner that it is in uterine pregnancy. The placenta becomes attached to some part, which receives an increased supply of blood for the nourishment of the foetus.

**SYMPTOMS.**—These vary a good deal. Usually many of the signs of pregnancy are present, but accompanied with a degree of irregularity in their intensity. The increase of the abdomen generally differs from that in ordinary pregnancy, being more to one side, and the pain and uneasiness may be confined to the spot where the tumor is felt. Great stress has been laid upon a sense of weight, and uneasiness, deeply seated in the pelvis, and occasionally extending to the kidneys, as a symptom of ex-foetation.

When, however, the cyst which holds the ovum bursts, a series of new and alarming symptoms occur. The patient complains of great pain which comes on suddenly, collapse, languor, great debility, and exhaustion. Sometimes there is a discharge of blood from the vagina, tenesmus, dysuria, and such symptoms as follow from loss of blood.

TREATMENT.—Where exfœtation is suspected, the woman should avoid every cause that may tend to rupture the cyst—as severe exercise, exertions of strength, &c. At the same time means should be used to keep the general system free from disease.

When the rupture takes place, marked by the sudden giving away, collapse, exhaustion, &c. the second indication is to moderate the effusion, and support the strength. For this purpose the woman should be placed in bed, with her head low, and have her abdomen firmly compressed with a binder. In the mean time, cayenne combined with astringents should be used freely, together with other means to promote perspiration, as recommended in abortion.

After the collapse is relieved, we should endeavor to counteract the inflammation which follows, by the use of the vapor bath, diaphoretic teas containing lobelia, injections, or gentle laxatives, and, if necessary, the course of medicine. In the mean time nature should be aided by quietness, &c., &c., to accommodate itself to the new state of things—and after we find an effort made to remove the fœtus by an abscess, or fistulous opening, it may be sometimes advisable to assist the process, by enlarging the opening. As a general thing, however, nature is competent to perform her own work; and there is sometimes danger of causing serious hemorrhage by attempting to enlarge the passage.

It should be remembered that cases of the kind we have been considering very rarely occur—and when they do happen their fatal tendency may generally be obviated, we presume, by proper management. Females, therefore, who are liable to become pregnant, need not allow their minds to become troubled, or filled with apprehensions of danger from this source. When this species of abnormal pregnancy exists it is the result of some extraordinary cause, and is attended with symptoms different from those of ordinary gestation. We therefore repeat again, that females need not apprehend danger from a circumstance that may, as a bare possibility, occur under some circumstances.—Nature is in general competent to the safe performance of all her offices.

#### SIGNS OF PREGNANCY.

Females under certain circumstances, usually feel much interested in knowing whether conception has taken place or not. To assist them in forming an opinion in such cases, we add a short section on the signs of pregnancy. The most important are as follows:

1. A failure in the return of the menses at the usual period. This, however, considered alone, is an uncertain sign, since they may be arrested by cold or other causes. But if more than one period passes without their appearance, and certain other symptoms are manifest—

ted, the evidences of pregnancy are somewhat conclusive. It may be remarked also, that women sometimes menstruate during the first months of pregnancy, or during the whole period of utero-gestation, so that the appearance of this discharge is not always conclusive evidence against conception.

2. MORNING SICKNESS.—Soon after conception most women are troubled with more or less nausea and vomiting, especially on rising in the morning. This may commence immediately after conception; but generally not until the fifth or sixth week; and continues until the third month. This also is an uncertain symptom when viewed alone. A similar sickness may arise from other causes, while in some instances women go through the period of pregnancy without any feeling of sickness at all.

3. MAMMARY SYMPATHIES.—About two months after conception certain changes become manifested in the breasts. At that time a sensation of fulness is felt in the breasts, accompanied with throbbing and tingling pains in their substance, and at the nipples. At the same time they increase in size and fulness; the areola or circle around the nipple changes its color and becomes much darker, and after sometime milk is secreted. These symptoms also, are subject to variation. The breasts may undergo these changes from other causes that enlarge or otherwise affect the womb. Still they are the most unequivocal of the early signs of pregnancy.

\* 4. ENLARGEMENT OF THE ABDOMEN.—During the third month after conception, a gradual enlargement of the abdomen becomes perceptible. During the fourth month the womb ascends above the pubis, and may be felt as a rounded tumor, which goes on increasing until it occupies the whole abdomen. The uterine tumor may be distinguished from dropsy by its firmness, elasticity, and by preserving its form when the woman is in different positions; whereas in ascites the tumor is not so pointed, or well defined, the fluid settles to the lower part of the abdominal cavity as she changes her position, and the abdomen has not the same firm elastic feel. Nevertheless cases do occur which are embarrassing; the uterus may be distended by air, fluids, or hydatids, and then the abdomen presents the same appearances as in pregnancy.

5. QUICKENING.—At the fourth month of pregnancy or thereabouts, as before remarked, the womb with its contents rises out of the pelvis, after which the first motions of the fœtus are perceived. The first sensations are usually like a feeble pulsation, yet they are frequently accompanied with sickness at the stomach, and even fainting. By degrees they become stronger, until the motions of the different extremities are perceptible. Here, also, under some circumstances, we may commit mistakes in judging of the uterine condition. The motions of the fœtus are sometimes simulated by wind in the bowels—and on the other hand cases may oc-

cur where no motions are perceived by the mother until at a later period of pregnancy.

There are other symptoms that may assist in judging of the condition of the female, which are of service to the practitioner only—as those which are gained by ballottement,\* auscultation, &c. These, however, it is not our present purpose to notice.

In judging of the condition of a female with regard to pregnancy, no decision should be made without a full and complete history of the case, and a knowledge of all the symptoms. By carefully comparing these together, and properly weighing all the circumstances, with a suitably reference to the existence of any of the diseases of pregnancy, hereafter described, we need not fail in our decision, in a vast majority of instances.

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\* Upon second thought we add a brief note on *Ballottement*. This operation is performed by an examination per vaginam. The woman should be in the upright posture—the operator must introduce the forefinger of one hand, and place it upon the neck of the womb—while with the other hand the uterine tumor is kept in a steady position—then suddenly jerking up the point of the finger against the neck of the womb, something will be felt to recede from the finger and fall again in a moment or two. This is the *fœtus*, caused to rise in the liquor amnii in which it floats, by the motion of the finger, and descending by its own weight. This test is most available during the fifth and sixth months, and is infallible.

## DISEASES OF PREGNANCY.

"Pregnancy, although a perfectly natural state, renders the woman liable to the inconvenience of certain diseases which, under other circumstances, she might more frequently escape. The most common complaints attendant upon this state of the system are such as are not dangerous in their character, but which are still very often exceedingly troublesome and annoying. And we can scarcely conceive of any ordinary situation in which a female can be placed, that more urgently calls upon the husband for sympathy and soothing consolation, than that of suffering under the complicated ills so often attendant upon pregnancy; nor one in which he ought more earnestly to exert himself to lighten her burthens and by the soft blandishments of connubial kindness, assuage those irritable feelings to which her situation often gives rise.

The other sex may, and we have reason to fear that many of them do, look upon the pregnant female with the unpitying eye of cool indifference, whilst to herself it is a period full of painful importance, and not unfrequently of fearful apprehension. She is often harassed by a train of the most disagreeable symptoms, with the certain prospect that their termination, however anxious she may be for the accomplishment thereof, must be a scene of still more exquisite

and indiscribable anguish to her mind. But we do not wish to heighten the picture of female wo! Such as have borne childrer can respond to the truth of what we have said; whilst those who have not, need not allow their minds to be depressed. The process of gestation or pregnancy has been passed through by thousands and tens of thousands, without any remarkable difficulty, though not without pain—whilst the consolation of being mothers, the pleasures associated with lovely, endearing offspring, afford a rich reward for all.

Our object in thus enlarging upon this subject is to excite that tender sympathy in the minds of the other sex which the pregnant female so justly deserves, and so much and so imperiously needs. Every husband has it in his power to add immensely to the happiness of his wife; and during the often oppressive and tedious months of gestation she is certainly entitled to all that he can bestow. We very well know, however, that some women pass the period of pregnancy, without experiencing much more inconvenience than at other times; yet this can be said of but very few.

The increased susceptibility to disease which most females experience on becoming pregnant is supposed to be owing to more accute sensibility of the nervous system; but whilst they are more liable to be affected by slight impressions, they are less exposed to many fatal maladies."—*Howard*.

## NAUSEA AND VOMITING.

As before remarked, pregnant women are commonly much annoyed with frequent nausea and vomiting, especially during the early months of pregnancy. As a general thing, however, no danger can arise from their occurrence—though when excessive they are apt to produce considerable debility, and nervous derangement.

As these symptoms usually occur in the morning, just after rising, it would be advisable, under such circumstances, for the individual never to rise until she has taken a bowl of broth or porridge; or a cup of tea or coffee.

In addition to this she should employ some gentle laxative to keep the bowels open, and use lobelia in small doses several times every day. The spiced bitters, or composition tea, will often allay the irritability of the stomach, and check the vomiting.

When there appears to be considerable sourness of the stomach, some relief may be obtained by the use of soda or saleratus in water—Sometimes the difficulty may be almost overcome by the use of vinegar, lemon juice, or cream tartar in water.

When the vomiting is excessive, or if there are symptoms of inflammation of the stomach or other difficulties, emetics of lobelia and the vapor bath should be employed, in connection with diaphoretic teas, until the disagreeable symptoms are removed.

## HEART-BURN.

Pregnant women are often incommoded with heart-burn, which is generally most troublesome during the latter months of pregnancy. It generally arises from acidity of the stomach, and may be corrected by the use of chalk, charcoal, soda, magnesia, &c. The following compound will prove beneficial:—Take of magnesia a large table-spoon-ful, of subcarbonate of soda, one tea-spoon-ful, essence of cinnamon, a table-spoon-ful, water eight ounces. Mix and take two or three table-spoon-fuls, as occasion may require.

If the case prove obstinate, an emetic may be taken, and followed with the spice bitters to strengthen digestion. If the bowels are costive, they may be regulated with mild doses of vegetable physic.

## CRAMPS.

Women near the end of pregnancy are subject to cramps in the legs, thighs, &c., which occur most frequently when lying in bed. They are occasioned by the pressure of the womb upon surrounding parts, and consequently do not cease until after delivery. They may, however, under proper management, be rendered much less troublesome than they otherwise would be.

TREATMENT.—To prevent the cramp care should be used to keep the bowels regular and the pores open ; especially should the individual avoid exposure to cold, and other causes which are found to induce an attack. The vapor bath, or bathing the feet in warm water, drinking diaphoretic teas containing a small quantity of lobelia, and rubbing the limbs with cayenne steeped in vinegar, or some stimulating liniment, will prove beneficial. An excellent liniment for this purpose, may be prepared as follows:—Take *third preparation*, and tincture of camphor, equal parts, spirits of turpentine a small quantity, mix well and apply freely. Cayenne tea is often found beneficial, especially when the cramp affects the stomach. In bad cases, the anti-spasmodic tincture may be employed, in half tea-spoon-ful doses, in connection with warm tea of some kind, and repeated every few minutes until nausea and vomiting are produced. The nervine tincture, also, forms a valuable medicine in these cases. So, also, does the following: Tr. Assafœtida, Tr. English Valerian, and Tr. Sculcap—equal parts. Dose, a teaspoonful or more, and repeated according to circumstances. A valuable preparation for cramp of any kind, may be made by mixing blue cohosh and lady's slipper, or sculcap in powder, of each half an ounce, with a teaspoonful of lobelia seeds. Of this, made into tea, as much may be used—repeated as circumstances may indicate—as the stomach can bear. When taking the

above medicines, the patient should lie in bed, and have steaming bricks placed to the feet, or use other means to promote sweating.

#### SALIVATION, OR SPITTING.

It not unfrequently happens that women are troubled with a constant salivation, or spitting, during pregnancy. This is generally accompanied with acidity of the stomach, and a costive state of the bowels, and sometimes produces considerable debility.

TREATMENT.—Dr. Dewees recommends the use of antacids, such as chalk, soda, &c., to correct the stomach; magnesia to keep the bowels free; rinsing the mouth with lime water; the use of solid animal food; and resisting the desire to discharge the saliva from the mouth as much as possible. Perhaps as good a plan as this would be to take some mild laxative, and follow it with the use of the spice bitters—or if necessary an emetic.

#### HYSTERICIS.

Should sudden fainting, or any other hysterical affection arise, little more will be necessary than to expose the patient to a free, open air, to place her in a horizontal position, and to give her a glass of cold water containing a teaspoonful of No. 6, or a small quantity of cayenne.

Should palpitation of the heart be severe and

protracted, the patient may take a strong tea of lady's slipper, or assafœtida pills, or tincture; or use the nervine tincture, &c. The use of diaphoretic teas and the vapor bath, or other means to produce sweating, or the course of medicine, if necessary, should be resorted to in bad cases. If the bowels are irregular, use laxatives or injections.

## HEADACHE.

It is no uncommon thing for females, during pregnancy, to be troubled with headache, accompanied with a sense of fulness, or pressure in the vessels about the head, and pains in other parts of the body. It is usual for the doctors to recommend bleeding under such circumstances—yet no practice can be more inconsistent and unnatural than this. We are well assured that many of the diseases and difficulties attendant upon parturition, under fashionable management, have their origin in the practice of blood-letting. Why should it be considered reasonable, when nature is taxed to its full extent in providing for the growth of the fœtus, and in preparation for the approach of parturient struggle, to exhaust its power, by abstracting that fluid, without which life cannot exist at all? We can assure our readers, and we speak from a knowledge of facts, that although blood-letting, by reducing vascular fulness when it exists in some particular part may give present relief, yet it

ultimately results, not only in an increased tendency to the difficulty which it was employed to remove, but in many other evil, and sometimes fatal consequences. But what shall be done under the circumstances described above? We answer that the fulness about the head is produced, not by the existence of too much blood in the system, but by causes that derange the circulation and destroy its equilibrium—consequently all we have to do is to open the pores, recall the blood to the extremities, and prevent its return to the head. The means to be used are laxatives or injections, diaphoretic teas, vapor bath and other means to produce sweating, bathing the feet in warm water, friction to the surface, stimulating liniment to the extremities, and if necessary the course of medicine.

## COSTIVENESS.

This is a very common attendant upon pregnancy in every stage, and is the cause of many of the difficulties which females labor under during that period. It is caused by the pressure of the womb, with its contents, upon the rectum.

MANAGEMENT.—The best plan with which we are acquainted to regulate this difficulty is the daily use of injections. These may be composed of boneset and cayenne, or nearly any warm tea made stimulating with cayenne, or number six. If the bowels are difficult to move, a little

oil may be added to the injections, or salt and water may be used for this purpose.

Those who prefer purgative medicines can use some mild article of that class, in doses just sufficient to move the bowels. Active purging should be avoided.

Considerable attention should be given to the diet. The use of coarse bread, drinking warm tea, or eating parched corn, will aid very much in regulating the bowels.

#### PILES.

This is caused, generally, by the costiveness which prevails during pregnancy, and consequently may be prevented, or removed, in most cases, by the plan of treatment before recommended to keep the bowels regular. Sometimes a slight diarrhœa sets in just at the commencement of the piles. When this is the case astringent injections should be used several times a day. They should be used also when there is no diarrhœa, after the bowels are regulated by the use of laxatives, or laxative injections. In all cases number six should be added to the injections.

When the tumors are situated externally, and become irritated and painful, an ointment may be made by simmering the roots of Solomon's Seal in lard, and applied to the parts by means of a soft linnen rag, to be worn while the difficulty lasts; or the pile ointment may be used for this purpose.

## SUPPRESSION OF URINE.

“ A difficulty of discharging urine sometimes takes place during pregnancy in consequence of the pressure of the womb upon the urethra or pipe of the bladder. The consequences of a retention or stoppage of the urine are—a swelling of the bladder, attended with great pain; and if permitted to continue, will produce inflammation of the bladder and urethra, and sometimes terminate in death ”

MANAGEMENT.—Where the difficulty has existed some time, causing pain and inflammation, composition or some other sweating tea should be used until perspiration becomes free; at the same time warm fomentations may be applied to the abdomen, the individual may sit over a vessel of steaming herbs, or the hip bath may be employed. In addition to this, injections of slippery elm or flaxseed tea may be thrown into the vagina from time to time.

If the urine be entirely suppressed, and the treatment, recommended above does not immediately restore it, the use of the catheter, for its evacuation should be resorted to without delay.

This is a very simple instrument and may be procured at any drug store in the country, neither does it require any professional skill to employ it. All that is necessary is for the individual to lie on her back, and introduce the catheter into the passage leading to the bladder

and gently push it upwards und backwards, changing the direction somewhat as any resistance is offered, until it enters the bladder. If the woman should be unable to introduce the catheter herself, it may be done by her husband or female associate. A small goose quill with a hole cut near the end, and another near the feather part has sometimes been used in place of the catheter.

#### PAIN IN THE SIDE—JAUNDICE.

Pregnant women are sometimes affected with pain in the side, sickness at the stomach, and retching, the skin assuming a deep yellow color. It is only under these circumstances that the complaint proves distressing, and it is usually occasioned by the formation of one or more gall-stones, and the obstruction which they oppose to the usual and regular passage of the bile. The means most conducive to relieve the woman from this degree of the complaint, are warm fomentations to the painful parts, frequent steamings and full and effectual courses of medicine.

Jaundice, or any other billious affection prevailing during a state of pregnancy from the pressure of the uterus on the gall bladder or ducts, is to be obviated by keeping the body open with some gentle laxatives.—*Worthy*

## DISAGREEABLE ITCHING.

If disagreeable itching about the parts of generation occur during pregnancy, the bowels should be kept free with some mild laxative, and the parts perfectly clean by repeated washings with cold water. They may be washed with a decoction of sumach leaves or bark, containing a small quantity of number six; and a portion of the same fluid may be injected into the vagina several times a day.—See *pruritis or itching*.

## INABILITY TO SLEEP AND RESTLESSNESS.

Toward the latter part of pregnancy, women are frequently much troubled with restlessness, and an inability to sleep. This generally seems to be caused by an involuntary starting or motion of the limbs, just as the individual appears to be falling into a pleasant slumber. These startings of the limbs continue for some time, until at last, nature overcomes the difficulty, and she falls into a refreshing sleep.

MANAGEMENT.—The best method of relieving this difficulty with which we are acquainted, is the use of the vapor bath just before retiring to bed. The individual may also drink freely of composition tea, or which is better, a tea of blue cohosh, partridge berry, and nervine, mixed together in equal proportions. If the vapor

bath cannot be used, as a substitute, the individual should bathe her feet in warm water, at the same time drinking freely of some diaphoretic tea, until free perspiration is produced.

### SWELLING OF THE LEGS.

It is usual during pregnancy, especially the latter end of it, for the feet and legs to swell.— Sometimes also the veins become considerably enlarged, presenting along the inside of the legs, towards the knees, a chain of knots, of a blue color, which disappear by using friction after lying down. These swellings are caused by the pressure of the enlarged womb, which prevents the ready return of the fluids from the lower extremities.

MANAGEMENT.—Laxatives or injections to keep the bowels open, the use of the vapor bath, and stimulating linament applied to the extremities with considerable friction, constitute the best means to prevent the legs from swelling. When the veins become enlarged a bandage, or roll, applied with a moderate degree of firmness over the enlargement will give relief.

### OVER DISTENTION OF THE ABDOMINAL SKIN.

“ In the latter months of pregnancy, the integuments of the abdomen will sometimes become cracked and sore, the skin seeming to suf-

fer from over distension. In this case nothing is so effectual as a frequent use of warm oil by friction, and to give it somewhat of a medicated appearance a little camphor may be added."

#### PAINS IN THE OS PUBIS.

"In the advanced stages of pregnancy, some women experience a severe pain in or about the front bones of the pelvis, which is often very distressing. It appears to be caused by the continued pressure of the womb upon those bones, which becomes the greater as gestation advances.

TREATMENT.—"The pain may often be relieved by the vapor bath, or by profuse sweating before the fire. But the most effectual relief is obtained by supporting the belly with a bandage, over the shoulders and around the lower part of the abdomen. That part of the bandage which supports the bowels should be broad, so as to give an equal support to every part. To apply the bandage, the woman should lie down, and place it so as to be just of a suitable length in that position; and then when on her feet, it will support the abdomen, and prevent the pressure upon the os pubis or front bones of the pelvis."

## LONGINGS.

"When particular longings arise in a state of pregnancy, they should, if possible, always be gratified, as women are apt to miscarry from the anxiety they occasion when not indulged, as well as to convey some deformity or malformation to the offspring, by this unaccountable morbid appetite."

## CONVULSIONS.

"Convulsions may occur either during pregnancy or labor, and are of different kinds, requiring opposite treatment. One species is the consequence of great exhaustion from a tedious labor, excessive fatigue, or profuse hemorrhage. This makes its attack without much warning, and generally alternates with fainting, or great feeling of depression of strength and debility; the muscles about the face and chest are chiefly affected, and the pulse is small, frequent, and compressible, the face pale, the eyes sunk, and extremities cold. The fits succeed each other pretty quickly, and very soon terminate in a fatal syncope.

"In all cases of this nature, it should be our object to check the further operation of the exciting cause, by restraining hemorrhage, if present, or preventing every kind of exertion, and thus husband the strength which remains, or

recruit it by cordials:—liberal doses of pepper tea will be of infinite service.”

Hysterical convulsions are not so dangerous as other species are. These occur more frequently during gestation than labor, and have already been remarked on.

“The species of puerperal convulsions most generally met with, bears some likeness to epileptic fits, and it is only by being aware of the different degrees of violence attending each, that at first sight we can distinguish them. A fit of puerperal convulsions is much more severe than one of epilepsy, and a paroxysm of the former is usually so violent, that a woman, who when in health was by no means strong, has been so convulsed as to shake the whole room, and to resist the coercive power of many attendants. No force indeed can restrain a woman when in those convulsions. The distortion of her countenance is beyond conception; in regard to deformity of countenance, nothing bears resemblance to the progress of this disease; the rapidity with which the eyes open and shut, and the sudden twilings of the mouth, are inconceivable and frightful.”

Puerperal convulsions seldom occur before the sixth month, but may happen any time after that. They may arise as the first symptom of labor, or after the labor is finished. They depend on the state of the uterus, and occur oftener during the first pregnancy than subsequent ones.

“The characteristics of puerperal convulsions are as follows:—The paroxysms occur periodically like labor pains, so that there is considerable space between them at first, but afterwards they become more frequent. They not only occur with the labor pains, but in the intervals between; and whether there have been labor pains or not before they come on, we shall usually find the os uteri somewhat dilated, and is sure to become still more so from the continuance of these convulsions. At length if the woman is not relieved, and the convulsions continue without destroying life, the child is actually expelled by the contraction of the uterus, which power is capable of expelling it even after death.

“The immediate symptoms are somewhat similar to those of the epileptic paroxysm. The woman suddenly loses all sensation, and stretches herself out; the muscles then become extremely rigid, and are speedily afterwards thrown into violent convulsions, the face is distorted, the eyes are protruded, she gnashes her teeth and foams at the mouth. After the paroxysm is over, she remains in a comatose state, and has stertorous breathing, similar to what takes place in apoplexy. At length, except in very aggravated cases, she slowly comes to herself, but without being conscious that she has been in a fit. During the fit the skin becomes dark and purple, proving that the circulation through the lungs is not free, which

purple color leaves the woman after the fit is over. By the introduction of the hand into the uterus when these convulsions have come on, it has been ascertained that this organ is contracted, but with a tremulous undetermined sort of force perfectly different from what takes place at any other time.

"There are two cases of puerperal convulsions which are very distinct; one is a convulsion dependent on an irritable or excitable state of the nervous system; the other on a fulness of the vessels of the brain, or perhaps a slight extravasation from the vessels thereof.—In a woman strongly disposed to this complaint from such a cause, there will be a sense of great fulness in the head, giddiness in the advanced periods of pregnancy, drowsiness and a sensation of weight when she stoops forward, imperfect vision, and atoms floating before her eyes. These if allowed to continue, may lead to extravasation or puerperal convulsions, but if early attended to may be removed, and premature labor prevented."

**MANAGEMENT.**—Whenever a pregnant woman experiences symptoms like those described above, indicating a liability to be affected with convulsions, she ought to lose no time in neglect of the use of such means as are calculated to prevent an occurrence so alarming in its nature. Measures should immediately be taken to relieve the fulness of the vessels about the head, by the use of laxatives or injections con-

taining cayenne, bathing the feet in warm water, applying liniment with friction to the extremities, and the use of the vapor bath, diaphoretic teas, and other means heretofore described, to produce sweating. After free perspiration is effected an emetic of lobelia should be administered in mild doses—the woman in the mean time lying in bed—and being kept in a sweating condition. After the emetic she may continue the daily use of composition tea, or spice bitters, containing half as much nervine, paying proper attention to keep the bowels regular—This treatment should be persevered in, and the emetic occasionally repeated until the difficulty is entirely removed.

When convulsions actually occur, we should commence the treatment by rubbing the extremities and surface with the stimulating liniment, combined with an equal quantity of *third preparation*. In the mean time the *third preparation* should be administered in doses of two or three tea-spoon-fuls, and repeated every few minutes until relief is obtained. Injections, also, containing a large quantity of cayenne, administered to the bowels, have a powerful influence in quieting the irregular action of the muscles.

As soon as the convulsions abate, the following, or some similar preparation, may be administered until copious perspiration is produced; and then followed with an emetic, or if necessary, a course of medicine. Take blue cohosh

and sculeap or lady's slipper, each two parts cayenne one part,—mix. Dose, a tea-spoon-ful made into tea, and repeated frequently, according to symptoms.

If the jaws are locked during a convulsion the *third preparation*\* may be administered in warm water by injection; or it may be poured into the mouth through the teeth, and as soon as it comes in contact with the parts about the root of the tongue the rigidity of the muscles will give way. If flooding occur, either before or after the convulsions, it should be treated with cayenne, astringents, &c., as recommended in abortion.

After the convulsions are removed care should be taken to correct any tendency to their return. The bowels should be kept regular, the system invigorated with the use of the usual tonics and stimulants; and the course of medicine, and other means heretofore recommended to establish general health, should be employed according to circumstances. The preparation of blue cohosh, sculeap and cayenne mentioned above, taken three or four times daily, would be highly beneficial under these circumstances.

#### ABORTION.

By abortion or miscarriage is meant the expulsion of the fœtus at a period of gestation so

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\* If the third preparation cannot be held below in any other form may be used combined with cayenne and nuxine.

early that it cannot live, that is before the seventh month, after this it is called premature labor. It most commonly occurs about the third or fourth month of pregnancy, but may happen at any other period.

CAUSES.—Violent exertions of strength, severe exercise, fatigue, blows, falls, sudden fright, general disease, active purging, excessive venery, former miscarriages, great uneasiness of mind, uncommon longings, &c. Sometimes abortion is caused by the use of medicines given with that intention, as savin hellebore, &c. Such efforts, however, not only involve a criminal act of great magnitude, but greatly endanger the health and life of the woman.

“Abortions are often preceded by a general sense of coldness, flaccidity of the breasts, slight pains in the loins and lower part of the belly and sometimes with a slight febrile state of the system. In plethoric habits, and when abortion proceeds from over-action or hemorrhagic action of the uterine vessels, the fever is idiopathic, and precedes the hæmorrhage. After a short continuance of these symptoms a slight discharge of blood ensues, coming sometimes in clots, and at others gushing out in a florid stream, then stopping perhaps for a short time, and again returning violently.

“When the pregnancy is advanced beyond the third month, and abortion is likely to ensue, we have much bearing down, together with a derangement of the stomach causing sickness

and faintness, and we have likewise a most rapid discharge of blood, owing to the increased size of the vessels. In this stage the membranes often give way, and the fœtus escapes with the liquor amnii, whilst the rest of the ovum is retained for some hours, or even days, when it is at length expelled with coagulated blood. In some instances the whole ovum comes away entire. After the expulsion the hemorrhage ceases, and is succeeded by a discharge somewhat resembling the lochia."

There is a great diversity in the symptoms that precede and accompany abortion in different instances. Sometimes the pains are severe and long continued; at other times they are short and trifling. In some cases the hemorrhage is profuse and alarming; in others it is moderate or inconsiderable. The same diversity exists in reference to the duration of a miscarriage, for whilst many require only a few hours, and a majority not more than two or three days to complete the process, instances occur, in which abortion is threatened for a long time, and weeks elapse before it takes place.

In some instances the child is dead some time before the pains come on, and there are particular changes and feelings that indicate an approaching miscarriage. In these cases the morning sickness ceases, the breasts subside, no motion of the child is perceived, and a sensation of dead weight and coldness, is experienced in the lower part of the belly.

Sometimes a hemorrhage wholly internal, proceeds to a considerable extent before an abortion takes place. This is not so easy to detect. In general the patient becomes pale, exhausted, and faint, with a dark color under the eyes, and a quick and weak pulse. She complains of lassitude, slight shiverings, a dull pain in the pelvis, weight about the rectum, tightness in the upper part of the belly, and perhaps a difficulty in voiding urine, &c., with reaction at intervals. The uterine tumor, if above the pelvis, is unusually tense, and larger than the supposed period of pregnancy would warrant. After a while the distention of the uterus excites contraction, the membranes give way, and the fœtus is lost.

The danger in abortion is always proportioned to the loss of blood. Generally speaking the flooding is less the nearer gestation is to its completion.

MANAGEMENT.—When abortion is threatened, but the fœtus is not yet expelled, our aim should be to prevent miscarriage if possible. The patient should be directed to keep quiet in bed, and have a steaming brick placed to her feet, and another to her back or bowels. She should also drink freely of composition tea containing an additional quantity of cayenne—or if there is considerable pain, the anodyne powders combined with cayenne, or astringents combined with cayenne and nervines may be used.

Should there be considerable flooding, large and repeated doses of astringent teas combined with cayenne, or cayenne alone, should be administered. The following form of combining these articles is given as a sample: Cranesbill, Bethroot, and Cayenne—equal parts. *Dose*, a teaspoonful—repeated every few minutes according to circumstances. In connection with the above treatment, stimulating injections to the bowels, and astringent injections to the vagina, should be employed according to circumstances. Emetics, also, and the vapor bath, in consequence of their equalizing tendency, have been highly recommended in cases of flooding. We are quite certain, however, that if astringents and stimulants, are employed in connection with other parts of the treatment here advised, emetics will seldom be needed.

But if abortion has taken place, or seems unavoidable, we should then endeavor to allay the most dangerous symptoms, and conduct the woman through the process with as little injury as possible. If the hemorrhage is slight, and the pains increase and expel the ovum, little treatment will be necessary. If the fœtus alone be expelled, and not much flooding ensue, we should give compositson or cayenne tea, and wait for the contraction of the womb to expel the secundines. If flooding becomes dangerous, the means recommended above should be vigorously employed, and persevered in, until the danger is removed. In the mean time much

advantage may be gained by the application of friction to the abdomen by briskly rubbing the hand over it, and attempting as it were to grasp the uterus by closing the fingers upon it. Should these means fail to arrest the flooding, a full course of medicine may be administered, and followed with cayenne and astringents. Females who are disposed to abort every time they become pregnant, should pay particular attention to themselves while in that state—since frequent abortions necessarily prove hurtful in a high degree. They should not only live apart from their husbands, and avoid every other cause of miscarriage, but should also attend carefully to the general health and strength, during the whole period of pregnancy. The means to be used may consist of light courses of medicine, repeated occasionally; laxatives or injections; spice bitters, or composition, &c.

We are aware that the treatment here recommended, especially in cases of flooding, is directly opposed to the plan commonly pursued—and we know, also, that its safety and efficiency equally contrast with the harshness and uncertainty of popular management. We have often been astonished at the want of philosophy which is manifested in many of the so-called scientific methods of cure which prevail in modern times. In fact we fear not to hazard the opinion, that the great mass of all that is recorded in medical books, or taught in popular medical schools, relating to the cure of disease,

is not only wrong in principle, but dangerous, and frequently fatal in practice. The case under consideration furnishes an illustration of this truth, so plain and simple as to be within the comprehension of the weakest intellect. The conditions existing in uterine hemorrhage, are simply a relaxed state of the womb, and a strong tendency of blood to that part. Every one who has ever witnessed a case of this kind knows that the extremities are cold, and the surface dry and contracted, in consequence of the recession of blood from those parts. Under these circumstances the indications of cure are fulfilled by affording to the womb a proper stimulus to aid its contraction, in connection with the use of means to recal the blood to the surface and extremities—thus relieving the determination to the womb which is the cause of flooding—for it should be remembered that no considerable hemorrhage can ensue while a perfect equilibrium of the circulation exists. Bearing these things in mind, let us turn our attention to the customary management of such cases in scientific hands. When hemorrhage occurs, it is customary to place the woman in a cool room, keep her lightly covered, give her cold drinks, apply ice or cloths dipped in cold water to the belly and back, and not unfrequently, although the uterine drain may be fast wasting the vital fluid, venesection is practiced, and the lancet opens another channel through which the stream of life may speedily flow. That this treatment is

wrong must be evident to any reflecting mind at once. The application of cold water, under the circumstances, cannot fail to increase the constriction of the surface, and drive the blood with greater force to the relaxed and bleeding womb. This state of things must necessarily continue, under such management, until complete exhaustion is produced, the heart and arteries cease their action, and the alarmed and shivering sufferer faints with the loss of blood. The result is, either the individual dies at once, or possibly the reacting power of nature rallies its energies, and in its last effort at resistance the womb contracts, the bleeding ceases, and the circulation becomes in a great measure equalized. But the consequences are not yet over. A long season of debility follows, during which is often laid the foundation of obstinate and chronic maladies, that render future life a scene of suffering and distress.

How beautifully does the botanic practice contrast with these barbarities. The application of warmth and friction to the surface and extremities, invites the blood to those parts, filling their emptied and constricted vessels; while the use of stimulants and astringents internally, stimulates the womb to contract, and at the same time aids in producing a speedy equilibrium of the circulation. The recovery is rapid and certain under such management. No lingering debility ensues as its consequence, no tedious maladies follow in its train.

Should it be objected that stimulants, especially cayenne pepper, accelerate the circulation of blood, and consequently must increase the hemorrhage, we reply that cayenne pepper is a healthy and diffusible stimulant, acting in perfect harmony with the living principle—that its natural effect, under all circumstances, when taken into the stomach, is to relieve any local tendency of the blood, and at the same time impart tone and energy to the different organs. As soon, therefore, as the system is brought under its influence, not only the circulation becomes free, but the uterus, in the case we have been considering, contracts, and the mouths of its bleeding vessels become closed as in their normal state. We can assure our readers that this is not speculation. We have seen the plan of treatment here recommended, applied in the most obstinate cases, and always with prompt and certain effect. We have never known it fail in a single instance.

#### GENERAL MANAGEMENT OF PREGNANT WOMEN. +

Having noticed those particular difficulties to which pregnant women are more or less subject, we proceed in a brief section to present some general rules for their management while in that condition.

1. The pregnant woman should observe the strictest temperance and regularity in diet, sleeping, exercise and amusements. We do

not mean by temperance that she should deprive herself of a reasonable and healthy amount of food—all that nature may require for the demand made upon it under existing circumstances. It is only meant that she should avoid overtasking the digestive organs, select her diet from those articles of food which she knows to agree with her, and take her meals at regular and usual hours. Similar remarks may apply to sleeping and exercise. Especially should she avoid late hours at night, and rise early in the morning.

2. Over heating and irregular passions should be avoided, and a composed and cheerful state of mind be preserved. To this rule it is hardly possible to attach too much importance. The health and safety of the mother is liable to be materially affected by an indulgence in gloomy forebodings, or fearful anxiety in reference to the termination of her present condition. The same may be said concerning the influence of exciting passions, of any kind. And not only is the safety of the mother influenced by the observance of this rule, but the welfare of the child is more or less connected with the state of mind existing in the woman during pregnancy. Numerous examples might be cited, in illustration of the influence, which particular mental states of the mother exercise over the mental and physical condition of the child. We have not space, however, to refer to proofs of this kind in the present instance. We will only reiterate

the sentiment, that mothers may expect to impress on the moral nature of their offspring, in some degree at least, those traits of character which are most active in themselves during pregnancy.

3. "The hazard of shocks from falls, in walking and riding; and from bruises in crowds; of frights from bustle, &c., should be avoided with the utmost circumspection."

4. The dress of pregnant women ought to be loose and easy, and adapted to the existing season of the year. They should be accommodated with free, pure air, be gratified in all reasonable things, and have their spirits kept up by a variety of objects and agreeable company.

5. The bowels, also, should be kept in a healthy and regular condition, by the use of injections, or laxatives, if a disposition to costiveness prevails.

6. In addition to the above, the application of the vapor bath once a week, and of frequent washes to the whole surface, will be of particular benefit. Especially should the feet and extremities be kept warm, and the general circulation free. If other means fail to preserve a comfortable state of health, *courses of medicine* should be administered at appropriate intervals—accompanied with the intermediate use of tonics, &c. Towards the latter part of pregnancy the following compound may be used with great benefit. It will not only remove many of those disagreeable symptoms which pre-

vail at that time, but will enable the woman to pass with ease and safety through the process of delivery. Take unicorn, blue cohosh, red raspberry leaves, and flax seed, equal parts by weight, pound together in a mortar, and mix. Dose, a table spoon-ful in a pint of boiling water, to be taken at three times, morning, noon, and night.

7. When complaints of common kinds occur, they should be treated as under other circumstances. No danger may be apprehended from the use of botanic remedies during pregnancy. They are safe under all circumstances.

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## CHAPTER IV.

### LOCAL DISEASES AFFECTING THE FEMALE ORGANS OF GENERATION.

FLUOR ALBUS.—(*Leucorrhœa*.)—This complaint, commonly called the *whites*, is one to which females are extremely subject, and one that proves very troublesome, especially to persons of delicate constitutions—in its aggravated form soon prostrating the vital energies, and ob-

literating every trace of beauty in the finest countenance.

Leucorrhœa may be defined a disordered secretion of a mucus, or sero-mucus fluid, from the uterus and vagina of women arising from a weakness or debility of those parts, sometimes from irritation or chronic inflammation of their lining membrane.

*Symptoms.*—This disorder first shows itself in a discharge from the vagina of a fluid, generally white, but sometimes of a brown, green, or yellow hue. In some persons this discharge resembles starch mixed with a mucilaginous fluid. Sometimes it presents the appearance of pus, and has the property of corroding the parts with which it comes in contact. Usually the discharge is white and inoffensive at first, but acquires its different discolorations, and various degrees of acrimony, as the complaint advances.

“In point of quantity, also, great diversity occurs in different cases. In some instances it is so moderate as hardly to occasion any inconvenience, whilst in other cases the evacuation is extremely copious. When the discharge is very profuse, and of an acrid quality, the external parts of the genital organs become red, swollen, and painful, and this state of the irritation usually extends into the vagina, and even to the mouth of the womb, rendering the whole passage, and especially the os tincœ, very tender to the touch.”

These discharges are also accompanied with

a variety of disagreeable symptoms, whose severity is proportioned to the violence or continuance of the disorder. These may be manifested in a sensation of weight in the lower part of the abdomen, which is followed by coldness of the extremities, pains in the back and loins, lassitude, cholic pains, depraved appetite, indigestion, head-ache, acidity of the stomach, palpitation of the heart, dizziness and general debility.

If the disease is suffered to continue the injurious impression which it makes upon the general health usually becomes more and more marked; the discharges increase in quantity and purulency; and the relaxation and languor of the muscular system are more troublesome. At length, in the worst cases, the debility becomes so great that the slightest exertion is painful, producing palpitation of the heart, and hurried breathing, the digestive powers become exceedingly weak, and the pulse irritated and feeble; sometimes nausea and vomiting occur, and finally hectic fever and rapid emaciations arise.

Fortunately, however, cases of the violent character described above, rarely occur, though in all protracted states of the complaint the general health suffers, and a variety of disagreeable and painful symptoms follow.

Leucorrhœa, also, seldom fails to make a decided change in the appearance of the skin and countenance of the individual affected with it. The face and lips are pale, the eyes surrounded

with a dark circle, the eye-lids swollen; and the whole features present an air of languor and dejection.

Women who are troubled with the whites to any considerable extent, are usually barren.—In fact, where the discharge is very great, it may be doubted whether conception can take place at all. In such cases the menses are generally suppressed, and in all cases they are more or less irregular.

*Causes of Leucorrhœa.*—The following are generally supposed to be the most common causes of this complaint: excessive sexual indulgence, difficult labors or improper management during parturition, falling of the womb, tight lacing, depressing mental emotions, suppressed piles, self pollution, abuse of emmenagogues, indolent habits, severe labor, atmospheric changes, the use of spirituous liquors. excesses of different kinds, drastic purging, &c.—Leucorrhœa is also frequently caused by *ascarides*, or worms, in the rectum, and irritating substances in the vagina, &c.

This complaint is generally limited to the period of life during which females menstruate, though persons of all ages, even children, are sometimes subject to it.

*MANAGEMENT.*—The following outline of treatment embraces the general principles that should govern us in the cure of leucorrhœa.

1. *Attention to the Cause.*—If it depends upon the habits, mode of living, or any irregularities

Medicines that produce the menstrual discharge. Pg. 288

of the patient, endeavor as far as possible to correct the condition which produce it; if it is connected with local irritation as worms in the rectum, or some irritating substance in the vagina, a removal of the cause by the use of appropriate means, will generally effect a cure.

2. *Attention to the General health.*—If there is much general derangement, the *course of medicine*, should be resorted to, and repeated as circumstances may require. If the liver is affected, or the bowels irregular, use pills of extract of Loneset, thickened with cayenne, three or four times a day, and bathe the side with liniment. Injections to the bowels, also, will be of service in such cases. If there is present nervous derangement, use the nervine tincture, or a tea of scal-cap. If the extremities are cold, bathe them in warm water frequently, and rub them with liniment.

3. *The use of Astringent tonics, &c.*—These may consist of the *astringent tonic compound*, *female restoratives*, &c. The following compound also, is highly esteemed in this complaint—Unicorn, golden seal, poplar bark, layberry and myrrh in equal quantities all finely pulverized and mixed; dose, half a tea spoonful in a little cold water every four hours.

4. *Astringent Injections per Vaginum*—These may consist of a strong decoction of some vegetable astringent, as witch-hazel, caesars lill, oak bark, beach root, &c., with the addition of a small quantity of number six. They should

be employed three or four times a day. If the discharge from the vagina is of considerable quantity; or of an acrid nature, care should be taken to keep the parts well cleansed by injecting into them a quantity of mild soap suds, before using the astringent application.

5. *Incidental Means.*—In connection with the above, there are other things that may profitably receive our attention, such as sponging the thighs and loins with cold water every morning, saline washes, friction with the flesh brush, using proper diet and exercise, wearing the strengthening plaster over the small of the back, &c.

There are a number of simple articles which are highly esteemed in the cure of this complaint, as beth root, unicorn, dog wood blows, solomons seal, bal am fir, &c. The latter may be made into pills with cayenne; dose, three pills, three or four times a day.

In mild cases the *course of medicine* may be omitted, using other parts of the treatment as here recommended, according to circumstances.

#### FALLING OF THE WOMB.—(*Prolapsus uteri.*)

Falling of the womb is a displacement of that organ downwards; and it may be complete, or incomplete.

When the prolapsus is complete, the womb falls down so far as to protrude through the external parts, and hang between the thighs in the

shape of a large fleshy mass, or tumor; when incomplete, it projects more or less into the vagina, but does not descend through the lower strait.

This complaint has generally been divided, by writers on the subject, into three degrees or varieties, each marked by symptoms in part common to all, and in part peculiar to the particular stage.

*The first degree* consists of a slight depression, or settling down of the womb into the vagina, which it enlarges to make space for itself therein. The symptoms are a dull pain in the loins, a dragging sensation about the groins, a sense of weight at the fundament, and a bearing down, which is increased by walking, or standing long on the feet. In a vaginal examination the womb may be felt, in the form of a tumor which can, without difficulty, be raised upwards by the finger, but falls down again upon removing the pressure. The nature of the tumor can easily be determined by the presence of the *os uteri*, which may be found turned towards the sacrum, (lower part of the back bone,) and down nearly midway in the vagina, which is drawn down from the upper part, and partially inverted.

*The second stage of Prolapsus* is attended with symptoms that differ somewhat, according as it is produced suddenly, or otherwise. When it is produced suddenly, it is frequently accompanied with protracted faintings, violent floodings, se-

vere pains in the pelvis, vomiting, &c. On the other hand, when the displacement takes place slowly, these phenomena are seldom witnessed.

In this degree of the complaint the womb descends so low into the vagina, that the woman becomes sensible of the presence of a tumor so near the external passage, that it seems ready to escape whenever she makes any considerable exertion. Besides this, she experiences, to a greater or less degree, severe pains in the groins, and lower part of the belly, bearing down, a difficulty in standing or sitting, and sometimes nausea and vomiting. To these symptoms may be added extreme costiveness, and a difficulty, or impossibility of passing urine, without first lying down and pressing up the tumor. These difficulties are caused by the pressure of the womb upon the bladder and rectum.

If an internal examination be made while the woman is in the standing posture, the womb will be found low down in the vaginal passage. The only danger of mistake in such cases, is that of confounding the fallen uterus with a fungus tumor of the *cervix uteri*, or a polypus of the womb. These mistakes may be avoided by remembering that a tumor constituted by a prolapsed womb, is harder and more sensitive than polypus; and that the *os uteri*, which can always be distinguished in the lower part of the mass, is never simulated by any opening which may exist in other tumors. Besides this, the tumor formed by the fallen uterus is shaped like

an inverted cone, small below and large above; while a polypus is always largest at its lower extremity—being usually suspended by a small pedicle, or neck.

*In the third degree* of this complaint the prolapsus becomes complete, and the fallen womb hangs between the thighs, having dragged down, in its descent, the vagina which is turned inside out, together with the bladder, and a portion of the rectum.

As soon as the prolapsus becomes complete, those symptoms which are caused by the pressure of the womb upon the bladder and rectum disappear, and the water and stools are passed without difficulty. But although these symptoms are relieved by the complete descent of the uterus, the others described as belonging to this disease, are aggravated to a painful degree.

In addition to these things, the projecting womb sometimes becomes affected with violent pain, and occasions copious hemorrhage. It, also, in consequence of being constantly moistened with urine, and exposed to the continued friction of the dress and thighs, becomes irritated, swollen, excoriated, and sometimes gangrenous.

Prolapsus uteri is most common among married women but is sometimes found in virgins. In all cases, when of long standing, it does not fail to carry with it certain evidences of constitutional derangement, and general ill health.

*Causes.*—The causes of this complaint, are pressure upon the belly by tight lacing, violent exercise as dancing or jumping while menstruating, hard labor or lifting, especially while pregnant, excessive venery, falls, walking or exercise too soon after confinement, frequent miscarriages; but perhaps the most common one is mismanagement during labor. The use of force, in such cases, under the pretence of rendering assistance, has made painful and unhappy the life of many an interesting female, who has unfortunately fallen into the hands of those *scientific*, yet unsuccessful, improvers upon nature's operations, called regular doctors.

The circumstances that predispose a person to this difficulty, are a natural largeness or shortness of the vagina, excessive dimensions of the pelvis, tumors formed upon the womb chronic leucorrhœa, living on poor weak diet or in low damp situations, a sudden or habitual state of emaciation, debility, &c.

#### TREATMENT

1. *In mild cases.*—In the first stage of this complaint, when not very troublesome a cure may generally be effected by quietness and the use, several times a day, of astringent injections per vaginam together with composition to a good stomach, and other means to promote sweating.

2. *In severe cases.*—When the derangement is of long standing, or of a more troublesome char-

acter, it will be necessary to use means more energetic than those above, and so selected as to meet the following indications: to restore the prolapsed womb to its natural position, to prevent a recurrence of the displacement, and to regulate the general health. These means must necessarily, therefore, be both of local and general application.

*The general treatment* should be of a tonic and equalizing character, and may consist of light *courses of medicine*, astringent tonics, washes, injections to the bowels, sponging the thighs and loins with cold water, &c., as recommended in leucorrhœa. This treatment should be persevered in until the general health is fully restored.

*The local treatment* is designed to effect the restoration of the womb to its normal situation, and prevent its descent, by the application of proper remedies to the parts locally implicated, their operation being aided by the mechanical action of other appliances, that are designed to give artificial support to the prolapsed organ, until it has acquired sufficient firmness to render foreign assistance unnecessary.

Generally speaking, it is a matter of only trifling difficulty to restore the womb to its proper position, when the prolapsus is in the first or second stage, and unaccompanied with other derangements. All that is necessary is for the woman to lie on her back, with her hips elevated somewhat higher than the other parts

of her body, when the womb will of its own accord, fall back to its proper situation. If necessary the reduction may be assisted by introducing a finger into the vagina, and pushing the tumor gently upwards to its natural position in the pelvis.

Having restored the womb to its natural situation, its retention in that position should be promoted by the application of a bandage, or *uterine supporter*, so adjusted as to exert a moderately firm and constant pressure against the lower part of the abdomen, in such a manner as to oppose a recurrence of the difficulty. These uterine supporters are made in different forms, but are so constructed as to exert a pressure, immediately above the os pubis, and in an upward direction, against the abdomen. These supporters can be obtained of most physicians and druggists in the country.

In addition to this mechanical management, astringent injections per vaginam should be administered several times daily. They may consist of a strong tea of one or more of the vegetable astringents, recommended in leucorrhœa and other forms of uterine debility. Under most circumstances, they are better administered moderately cool.

In those cases where the prolapsus is complete—the womb protruding entirely through the external organs—the cure must necessarily be attended with greater difficulty. If the prolapsus is recent, and the parts are not sore or in-

flamed, we may proceed at once to return the displaced organ, having previously washed it with a decoction of some vegetable astringent, and taken care to have the bowels and bladder emptied, either naturally, or by means of the catheter, and an injection. Having taken these precautions, the woman should be placed on her back, with her hips elevated, when the attendant, having previously smeared his hands with oil or lard, may proceed to the reposition of the uterus, by gently and gradually pushing it back to its proper place in the pelvis. This should be followed by an astringent injection, moderately cool, which should be repeated several times a day, the woman in the mean time remaining in bed, with her hips somewhat elevated, until the danger of a re-descent is past.

If the protruding organ has become irritated and swollen, means should be used to correct these conditions, before a reduction is attempted. To accomplish these results, we may apply emollient poultices (slippery elm or flax seed) to the womb, and use such general treatment as is calculated to aid their operation, as diaphoretics, the vapor bath, injections or laxatives, and emetics of ipecacuanha if necessary.

Under all circumstances, having accomplished the restoration of the uterus to its natural situation, we may succeed, in many instances, in effecting a permanent cure, simply by enjoining rest, applying the uterine supporter, and an occasional course of medicine, and astringent

injections per vaginam, together with stimulating injections to the bowels, as recommended before. The *strengthening plaster* worn over the small of the back or the *stimulating ointment* applied to the back and abdomen, will add in producing a cure.

In some cases, however, it is with great difficulty that permanent relief can be obtained from the application of the best plan of management known, and in every instance when the displacement has been of long standing, a persevering course of faithful treatment is essential to complete success.

The above remarks are not made with a view to discourage any who may be afflicted with this distressing malady. On the contrary, we hold out to them the assurance, that perseverance in the application of botanic remedies will in general be crowned with triumphant success. We have seen females enabled to heal by the means, after they had tried in vain the most popular physician of the old school — one of whom had not been able to walk without difficulty for years.

A remark or two on the use of pessaries, and we will leave this subject. The pessaries or instruments of different construction designed to support the womb in its proper position, by being introduced into, and worn in the vagina — They are formed of various materials, as gold, silver, wood, ivory, india rubber, glass, wax, cork, leather, and are of different shapes, some

being in the form of a globe, others oval, &c. These instruments can be procured of apothecaries generally, and need no farther description.

We will, however, give a few directions concerning their use. In the selection of pessaries, those of a globular form, and constructed of gum elastic, are to be preferred. It would be better, also, to procure a number of these instruments, of different sizes, so that, after one has been worn for some time, another of smaller size may be employed, so as to accommodate the healthy contractions of the vaginal passage.

When it is determined to introduce the pessary, the woman should be directed to evacuate the bladder, and at the same time should have her bowels moved with an injection. An astringent injection, also, should be thrown into the vagina, as before directed. Having attended to these directions, she should assume a convenient position, when the attendant (which may be the husband or a female friend) having smeared the instrument with lard or oil, may proceed to introduce it by gently entering it between the labia, and gradually carrying it up, with a dilating movement, to the proper position in the vagina, or until it furnishes the required support to the womb. If after it is introduced it proves painful on account of its size, it should be exchanged for one that is smaller. On the other hand should it be so small as no

readily to retain its place, a larger one should be tried.

The pessary should be taken out, and thoroughly cleansed, every two or three days, otherwise it may produce irritation, and cause much injury. It should have been remarked before, that these instruments are flattened, or made concave on one surface, to support the neck of the womb, and are perforated through the center, for the passage of the menstrual, and other fluids, which may issue from that organ. The operator, therefore, should so adjust the pessary, that the mouth of the womb may rest on its flattened or concave surface.

Pessaries, if employed at all, may be worn as long as the difficulty lasts. Some cases have been cured, by their use, in a few months. In other instances they have been worn for years, or during life. We would not, however, recommend their use, under any circumstances, unless we were confident that nothing else would answer in their place, as they are apt to occasion injury, by their tendency to create irritation and soreness.

We have already exceeded our limits, in writing upon this too common source of affliction to females, yet we cannot leave the subject without again recommending the botanic remedies to their candid and careful consideration. Let me then, appeal directly to those of my readers who are suffering under this, or other forms of sexual derangement. You once were

vigorous, healthy, and happy. Years since, from some cause, perhaps the officious interference of your medical assistant when upon the bed parturition—or the use of dangerous remedies, you found yourself affected with symptoms that marked the existence, in its incipient stage, of some form of those derangements to which your sex is liable. You thought little of them at first, but as time advanced they increased in severity, until you became alarmed, and applied to your family physician—in whose skill you placed the fullest confidence—for assistance. Still you experienced no change except, perhaps, an evident aggravation of your difficulty. Loosing hope of help from this quarter, and yielding to the advice of your neighbor, you placed yourself in the care of her favorite doctor, and under his direction received the usual routine—perhaps in a partially modified form—of allopathic management. But he was no more successful than the first—and tired of him, with new hope you flew to another source for help; and this course you have been pursuing until you have tried every modification of mineralism. You have been salivated, blistered, leeches, and worn setons, issues, and drains, in so many instances that you have forgotten their number, and the result of all it; you have pined away in secret, but in increasing sorrow, until rest and ease are almost forgotten strangers. The world around you are in a great measure, unacquainted with your suffer-

ings, and have no sympathy to bestow. True, those who knew you in your girlhood have witnessed a change in your appearance, as they have seen the rose gradually fade away from your cheeks and a deathly pallor usurp its place, but they know not the cause of all this—they see not the worm that is gnawing at the root of life—they heed not the destroyer that is poisoning the fountain of your existence and peace. Is not this a true, although feeble portraiture of the lot of thousands? But there are some, whose eyes will glance over these hasty thoughts, that have settled down in despair of help. They have often soliloquized after this manner: why is it that I am doomed to days of pain, and nights of weariness? Why were pleasant prospects presented before me, only to hasten me on to scenes of anguish? And why were the hopes of youth made to kindle with so much brightness, only to be quenched in the sorrows and darkness of future life. Thus they have gone on in their reflections, until murmuring thoughts against Providence have mingled with their speculations—and finally they have settled down in the conviction that all their afflictions are to be charged upon Omnipotence. Mistaken conclusion! And yet how many, in this way, have had their eyes blinded to the real cause of their troubles! The fact is, the Divine Being is not the author of these maladies, any more than He is the author of the suicides death. Where, then, shall we look for the source of

these afflictions? Truly where, but to the great cause of all disease, a violation of natural law. It is a law of nature that she perform her own work in her own way—but your attendant in the hour of parturition laid violent hands upon you, and substituting his bungling efforts for the beautiful operations of nature, gave you the first impulse in that painful decline which has followed you ever since.—Again, there is implanted in every being a conservative power, called the vital principle, *vis vitæ*, &c., whose influence is always exerted to preserve the integrity of the organized structure, and repair the injuries made by disease. Hence it follows that all agents, whose action is opposed to the vital principle, are improper, and dangerous in their operation, whether employed in a state of health, or in disease. But what has been the character of the treatment which you have received at the hand of all your physicians? Was not its tendency to destroy the *vitality* of your system, instead of assisting vital action? Have not principally all your remedies been active poisons—agents whose specific action is to destroy life? Is it any wonder then, that you have failed in your pursuit of health? Is it not rather a matter of surprise, that you are alive at all? But do you inquire is there relief for such afflictions as mine? I answer, most assuredly there is. 'Thanks to the bountiful provisions of a benevolent Deity, there is a "balm in Gilead," a healing fountain whose

streams o'erspread the world, and flow by all the habitations of man. Do you ask—where is it? I answer again—it is near at hand.—For years it has been at your door, presenting its humble claims, and soliciting your regard, but you have closed your ears to its demands, and turned away, to become enchanted with the hollow sounds of pretended science. You have sacrificed at the shrine of a pompous deity, that professed to abstract good from evil—to have power to suspend or change the immutable laws of our nature, and transform curses into blessings—while with contempt you have spurned the “still small voice” that whispered in your ear “follow nature and live.” Still it is at your door, and although, in consequence of your error, you have planted many thorns in your bosom, and sent many a pang through all your channels of sense, yet you may do as thousands have done, drink at the healing stream, and find, in some measure at least, your former vigor restored. But let me speak without a figure. The botanic treatment has established a reputation for success in the cure of female afflictions, that all the efforts of interested factions, aided by every influency that falsehood, appealing to the strongest prejudices may possibly possess, can never destroy. Thousands after having expended years, and much money, in pursuit of relief from allopathic skill, but to no purpose save to multiply their sorrows, have applied to the neglected, despised, *botanic doctor*

and to their inexpressible satisfaction, have found nature's remedies competent to their cure. These remarks we have penned, in the hope of benefiting many of the daughters of affliction, to whom we could not personally communicate instruction, and whose faces we expect never to see "in the flesh." Under these circumstances they will not, however they may treat the system we recommend, charge us with any motive, save a desire for their welfare.

#### RETROVERSION OF THE WOMB.

In this complaint the womb so changes its position that the *fundus* or upper part falls, or inclines, backwards and downwards against the rectum while the *os uteri* is turned forward, and upward, towards the *os pubis*, and against the neck of the bladder.

This difficulty manifests itself by a suppression of urine, caused by the pressure of the *os uteri* upon the neck of the bladder—while at the same time the passage of stool is rendered extremely difficult and painful. It is also accompanied with bearing down pains: and other that extend backward to the small of the back, and forward to the pubis, and down the thighs. These are frequently very severe, causing spasms, fainting, and other unpleasant symptoms.

If an examination be made per vaginum, the mouth of the womb cannot be felt, or not with-

out difficulty—but a round tumor may be distinguished, occupying the lower part of the pelvis.

Retroversion of the womb may be produced suddenly, or be more gradually developed, according to the circumstances which induce it, and the symptoms are more or less violent according to the manner in which it occurs.

This complaint usually occurs during pregnancy—but sometimes is found to take place in the unpregnant state, or after delivery, when the womb from any cause become considerably enlarged. When it occurs during pregnancy, it usually happens about the third, perhaps never later than the fifth month, because after that the enlargement of the womb raises it above the projection of the sacrum, so that the spine supports it in its proper position.

It is caused by a variety of circumstances, such as blows, pressure, sudden exertions, violent efforts in coughing, &c. but the most frequent cause, perhaps, is a distended bladder, from an accumulation of urine. On this subject doctor Den nan remarks:—Women who live in an humble situation or in an unrefined state of society, are scarcely ever liable to this complaint, because they are free from the constraint of company; and those in the highest ranks of the most refined society, not being abashed to withdraw from company, are nearly in the same situation. But those who, in the middle state of life, with decent, yet not over

refined manners, have not cast off the bashfulness of the former, nor acquired the freedom of the latter, are most subject to retroversion of the uterus."

To relieve this difficulty, a reduction of the womb to its proper place by a manual effort, becomes necessary. Before undertaking this, however, the bladder should be emptied with a catheter, and the bowels evacuated with an injection. Having taken these precautions, the individual may assume the kneeling posture, with her head and body inclining forward, so that the elevation of the hips may assist your efforts. Then introduce your finger, previously oiled, and with a gentle and steady pressure restore the womb to its proper place. It is usual to make the pressure, by introducing the finger into the rectum.

The following remarks from Gooch afford a very plain illustration of the operation above referred to:—"The womb is sometimes so low that the finger passes beyond, and an ill directed pressure from the rectum may force it down still lower; therefore first push it upwards by introducing a finger into the vagina, and then endeavor to complete the reduction by pressure on the womb from the rectum, not directly upwards, as the curve in the back bone will be an obstacle, but rather to one side or the other of the centre where there is the greatest space, and then upwards. The degree of pressure employed may be pretty considerable, and it

may be continued for ten minutes ; if the womb is once felt to move from its preternatural position, it rises easily into its proper place." But if a proper effort has been made to restore the womb, without success, we must then have recourse to other means to obviate the most painful symptoms. The bladder should be evacuated as often as circumstances may require, and the bowels kept free with gentle laxatives ; or which is much better, they may be moved once every day with an injection.— If there is any tendency to inflammation, it should be prevented by the use of diaphoretics, the vapor bath, or if need be the course of medicine. " Thus will be obviated the principal danger ; and as pregnancy advances, the womb will rise spontaneously out of the pelvis, in this way accomplishing a natural cure." The woman should generally keep her bed until a cure is effected.

" The treatment of this complaint is the same in all cases and may be thus summed up ; reduce the retroverted uterus if practicable ; if you fail in this attempt, draw off the urine twice or three times in every twenty-four hours ; evacuate the bowels every day ; and if any degree of inflammation is indicated by tenderness on pressure, employ the proper means to remove it, as heretofore directed. It may, however, be remembered, that this complaint very rarely occurs."

## INVERSION OF THE UTERUS.

In this difficulty the womb is inverted, or turned in side out, either partially or completely, by having the fundus drawn down towards, or through, the os uteri.

Writers have divided this kind of displacement into four varieties, as follows:—1. When there is a simple depression of the upper part. 2. When the upper part passes down so as to be perceived in the os uteri. 3. When the organ is completely inverted and lodged in the vagina, but the vagina does not participate in the inversion. 4. Where the vagina participates in the change, and the womb forms a large tumor, which is increased, by its containing within the cavity thus formed a portion of the intestines and the ligaments, which it has drawn down in its descent.

The symptoms attending this derangement are more or less severe, according as the inversion is more or less complete. It is generally accompanied with considerable hemorrhage, violent pains and dragging at the groins and back, together with fainting, and lacerating pains that are greatly mitigated by pushing the womb upward into the vagina.

This is a dangerous accident and when complete, likely to prove fatal unless speedy relief be obtained—although there have been cases known, where women have dragged out a miserable existence for years, with a complete inversion.

The following is the plan of management recommended by Dr: Curtis:—"To cure it give a course of medicine, with thorough application of strong lobelia and slippery elm tea (nothing else) to the vagina. Keep the patient in bed, with the pelvis high, and it will soon return. Now use injections of strong witch hazle, or nut galls, raspberry, blackberry briar, or sumach, or any innocent strong astringent, and tone up the general system."

We suppose, however, that this plan is intended only to apply to those cases where the womb does not protrude through the external parts. In such cases it is recommended to replace the womb by manual assistance. For this purpose the woman is placed upon her back, with her hips elevated by having several pillows placed under them, and her knees separated by an assistant—when the operator proceeds to push the womb carefully up, through the vagina, to its proper place. Some recommend returning the womb by pushing the fundus, or lower part, up through its inverted body, neck, and mouth, to its proper situation in the pelvis. Before attempting the return of the womb, it would be best to apply to it the tea of lobelia and slippery elm, as before directed.

It is proper to remark, that it is very difficult, in many instances, to distinguish inversion of the womb from polypus of that organ—so much so, that the most distinguished surgeons have been deceived—and in some cases the whole

uterus has been removed by an operation—it being mistaken for polypus.

We have already transcended our limits in noticing this derangement, yet we are not disposed to leave it, without a few words with regard to its cause. In fact had we spent all the space allotted to this subject, in portraying the evils of that unnatural practice which is its common origin, we should, perhaps, have conferred a greater benefit upon our readers than we do in the present course.

The causes of this complaint, as enumerated by writers on the subject. all, or nearly all, resolve themselves into this one—improper interference during labor, by forcible attempts to remove the afterbirth. If there ever have been any exceptions to this statement, they have been so exceedingly rare as to have escaped the observation of many of the most intelligent and extensive practitioners of the healing art. Indeed some of the best authorities deny the possibility of its occurrence from any other cause, than that of improper interference during parturition. The only one that has any degree of plausibility, is that of a polypus attached to the fundus uteri, which being expelled, by its weight draws down, and inverts the womb. Whether this cause has ever given rise to inversion of the uterus or not, it is certain, as before intimated, that, in a vast majority of cases, the difficulty has been produced by the rude hands of the self-styled guardians of physical health and hap-

piness. What a fountain of mischief has been the medical profession! How much pain and anguish have been felt, while we have remained ignorant of their cause! We could write volumes on this subject, but suppress our feelings for want of space.

# PROLAPSUS, OR INVERSION OF THE VAGINA.

This is a partial or total separation, and falling down, of the internal lining membrane of the vaginal canal. When the prolapse is complete, it presents the appearance of a soft compressible tumor protruding through the external parts. When incomplete, the tumor does not protrude externally. Sometimes also, the tumor is formed by the whole circumference of the vagina, while in others only a portion of the membrane is separated.

The symptoms attending this complaint vary considerably according to the extent of the prolapse. When it is only partial, there is a feeling of weight at the lower part of the vagina, together with dragging pains in the small of the back, and other disagreeable symptoms that nearly or quite disappear when lying down. When the falling is complete, there is, in addition to the above symptoms, a discharge of puriform mucus, an obstinate constipation of the bowels, and a partial or total suppression of the urine. If the tumor is permitted to protrude any length of time, it is liable to inflammation, gangrene, painful excoriations, &c.

This disorder has been known to prove troublesome during labor. Dr. Meigs mentions a case in which the vagina prolapsed at least five inches, and was as large as a man's arm. In this case, when labor came on the vagina was withdrawn, and the child was safely born. When the inversion is complete, the tumor presents so many different appearances in shape and size, as to render it sometimes somewhat difficult to distinguish it from prolapsus uteri. To avoid mistakes of this kind it should be remembered that the projecting vagina is of a soft consistence, is thicker at the lower part than above, is of a reddish color, and has a hole in the lower part sufficiently large to admit the finger, through which the os uteri may be felt.

The causes of this difficulty, as enumerated by writers, are such as the following:—external violence, falls, efforts at lifting heavy weights, masturbation, excessive venery, &c; but the most common and usual one is to be found in mismanagement during labor by the use of instruments, or violence in some other form, by which the walls of the vagina are subjected to such a degree of distention and friction as to separate a portion, or the whole of its lining membrane.

**MANAGEMENT.**—If the prolapsed part be unaffected with inflammation or swelling, it should be gently returned to its place, after which injections composed of a strong decoction of cranesbill, oak bark, or some other powerful astringent

should be administered to the vagina several times a day. The woman in the mean time should rest in bed until the parts have recovered their tone, which will be several days.

If the tumor is inflamed or sore, means should be used to remove the inflammation and soreness, before attempting to restore the prolapsed part. These may consist of light courses of medicine, diaphoretic teas, together with the application of a tea of lobelia and slippery elm to the fallen vagina.

#### VAGINAL HERNIA.

There are two varieties of this complaint—one caused by the displacement and projection of the urinary bladder through the walls of the vagina, and the other produced by a similar displacement of some portion of the bowels. We will notice these varieties separately.

In the first, which is called *vaginal cystocle*, the urinary sac is pushed down, by some cause, against the front wall of the vagina with such force as to cause a rupture, through which it passes, giving rise to a membranous fluctuating tumor that projects within the vagina, or even appears externally.

This difficulty is frequently complicated with inflammation of the bladder, vagina or womb, or with retroversion or prolapsus uteri. It also always produces a partial or complete suppression of urine, and sometimes an increased size

and tension of the abdomen with other disagreeable symptoms.

Vaginal cystocele may be caused by violent exertions, jumping, pressure on the abdomen, the labor of parturition, trotting on horseback, and any of the causes of other kinds of hernia. The predisposing causes are such as the following: too large pelvis, frequent child-bearing, carrying heavy burdens, chronic leucorrhœa, the habit of retaining the urine too long, abuse of sexual pleasures, tight lacing, &c.

This displacement shows itself in the form of a fluctuating tumor, which presses out the mucus membrane of the vagina and is of a bluish color. It may be distinguished from other tumors by the fact of its nearly or quite disappearing when the urine is evacuated. When it occurs during labor the mouth of the womb may be felt beyond the tumor, which will enable us to discriminate between it and the protruding bag of waters.

**TREATMENT.**—There are two objects to be had in view in the management of this difficulty, viz: to reduce the tumor and prevent its displacement.

When the hernia is a large one, it will be necessary to evacuate the bladder by means of a male catheter before attempting to return it. Should there be difficulty in introducing the catheter, we are not to be easily discouraged, but should continue our efforts, changing the direction of the instrument, until we succeed, or un-

til satisfied that no effort will be successful.

When the tumor is small, or after the urine is evacuated, there will be no difficulty in reducing the hernia, which may be done by gently pressing it up with the fingers, the woman in the mean time assisting the effort by resting in the horizontal posture.

After the hernia is reduced, the next object is to prevent a return of the difficulty. This may be accomplished by means of a pessary, or sponge dipped in some astringent preparation and cut into a cylindrical shape, and of the proper size to fit the vaginal passage, to be worn until a cure is effected.

The other variety of vaginal hernia, called *vaginal enterocoele*, is caused by the protrusion of a portion of the bowels through the walls of the vagina, which may be either at its anterior or posterior part.

The tumor formed by this hernia is soft, and partially or wholly disappears when lying down. The os uteri also, may be felt beyond it, which, added to other symptoms that it possesses in common with other hernias, will prevent our confounding this difficulty with other tumors developed in the vagina.

The causes of this malady are similar to those which occasion vaginal cystocoele and other kinds of hernia.

The treatment of vaginal enterocoele is similar to that in the preceding complaint, consisting, as in all other hernias, in reducing, and keeping the tumor reduced.

Before attempting to return the tumor, the bowels should be moved with an injection, after which it may be reduced little by little, the woman in the mean time lying on her back, having her hips elevated—or resting on her hands and knees, according as the rupture is in the posterior or anterior walls of the vagina. Should there be any difficulty in returning the bowels, advantage may be gained by the application of a tea of slippery elm and lobelia, or vapor by sitting over a steaming vessel.

After the the hernia is reduced it may be kept in place by the use of a cylindrical pessary, or sponge as directed in vaginal cystocele, which may be retained by means of a T bandage.

#### VULVAR HERNIA.

In this complaint the displaced urinary bladder, or intestine, instead of distending the walls of the vagina, as before described, passes along its side into the middle of one of the labia pudendi, where it forms a round, firm tumor, of greater or less magnitude, which becomes painful and increased in size, whenever she coughs or bears down, while in the standing posture.

The treatment of vulvar hernia is the same as in vaginal hernia, embracing the reduction of the tumor, and the use of the pessary, with the bandage, or other means to prevent a new displacement of the parts concerned.

## PRURITIS OR ITCHING OF THE VULVA.

The external organs of generation in women are frequently subject to pruritis, or itching, of a disagreeable kind. This difficulty sometimes occurs as the consequence of the change which takes place in the genital organs at the time of puberty, or as the effect of disordered menstruation, or worms in the rectum, and sometimes as the result of other diseases. It likewise takes place during pregnancy, and at the turn of life, and is always augmented by neglect of cleanliness.

The symptoms of this malady are, itching which is confined principally to the external labia, a fulness of those parts, with some degree of inflammation, which is occasionally followed by deep seated ulceration of the parts.

**MANAGEMENT.**—To prevent this disagreeable affection, and to assist in the cure when existing, cleanliness is of the utmost importance.—Females who are liable to any uterine or vaginal difficulty, should form the habit of frequently washing the external parts with cold water, in fact, frequent ablutions of this kind cannot fail to be of service under all circumstances.—In addition to this, the treatment recommended in disagreeable itching occurring during pregnancy, will effect a cure in all ordinary cases.

It should be remembered, however, that the removal of the cause is sometimes essential to

the cure. When caused by worms, proper treatment should be applied to remove them, and when from leucorrhœa, or acrid discharges from the vagina, these difficulties should be corrected by appropriate remedies.

When ulcers have formed, in addition to the above, farther attention will be necessary. If they are not very deep or of long standing, it may suffice to wash them with a tea of sumach, white pond lilly, or some other astringent, containing a quantity of tincture of myrrh, to be followed by the application of a slippery elm poultice with ginger sprinkled over its surface. If the ulcers are not disposed to heal after these applications, blood root should be added to the wash, and general treatment, including the course of medicine, should be employed. The *healing ointment* is a valuable application, also, for ulcers.

#### INFLAMMATION OF THE VULVA.

The *labia externa* are sometimes subject to inflammation and its consequences. In some instances this is followed by suppuration, and in others gangrenous sloughs are produced.

This malady may be caused by wounds, shocks, improper interference during labor, &c. It frequently occurs after each menstrual discharge, and occasionally without any known cause.

TREATMENT.—This may consist of such means as are generally used to cure inflammatory affections seated in other parts, embracing diaphoretic teas, laxatives, the vapor bath, and the course of medicine. For local applications the poultice of slippery elm and ginger may be used. The application of vapor by sitting over a steaming vessel of bitter herbs will also be beneficial.

If abscesses form, they may be opened by an incision on the internal surface of the labia externa. If these do not heal readily, they should have injected into them, two or three times a day, an infusion of blood root, or wine and water mixed in equal proportions. We should be careful, however, not to mistake vulvar hernia for abscess, since the most dreadful consequences might follow from plunging the lancet into the intestine contained within the labium of the patient.

Should gangrene take place the parts may be freely washed with tincture of myrrh, and antiseptic poultices may be applied. These may consist of the dregs of myrrh, slippery elm and gum myrrh finely pulverized mixed with number six, or yeast and charcoal, &c.

#### INFLAMMATION OF THE VAGINA.

Acute inflammation of the vagina is generally connected with inflammation of the womb, yet it sometimes exists separately.

The symptoms are a sensation of weight and a slight itching in the genital parts, which are followed by dragging pains in the groins, and pains in the abdomen, and hips and loins, with a feeling of constriction in the vagina. As it advances the itching changes into a disagreeable burning sensation, especially during the discharge of urine, and the parts become swollen to such an extent as to render the introduction of the finger difficult. In three or four days a mucus discharge commences, which increases in quantity, and the color changes from white to yellow, or green—the external parts become excoriated, and sometimes a general fever arises.

The causes of this difficulty are obstetrical force, venereal excesses, masturbation, or any irritating cause acting upon the vagina.

TREATMENT.—In addition to the general treatment recommended in the foregoing disease injections of slippery elm and lobelia tea, should be thrown into the vagina several times a day, which should be followed, after the inflammation is reduced, with injections of sumach or some other vegetable astringent. Sitting over a vessel of steaming herbs as before recommended, will be of considerable service. The hip bath, also, frequently administered, is of the greatest value in this, as well as in all other diseases of the genital organs.

## INFLAMMATION OF THE WOMB.

This disease most commonly occurs after parturition, though unpregnant and single women are sometimes liable to its attacks.

The causes of inflammation of the womb are suppression of the menstruæ, excessive venery, solitary enjoyment, celibacy, unsatisfied desires, wounds, blows, severe exercise, lifting, the use of violent emmenagogues, leucorrhœa, cold bathing while menstruating, &c.: but the most common cause may be found in improper interference, and the use of instruments, during parturition.

“An inflammation of the uterus shows itself usually about the second or third day after delivery, with a painful sensation at the bottom of the belly, which gradually increases in violence, without any kind of intermission. On examining externally the uterus appears much increased in size, is hard to the feel, and on making a pressure upon it, the patient experiences great soreness and pain.

“Soon afterwards there ensues an increase of heat over the whole of the body, with pains in the head and back, extending into the groins, rigors, considerable thirst, nausea, and vomiting. The tongue is white and dry, the secretion of milk is usually much interrupted, the lochial discharge is greatly diminished, the urine is high colored and scanty, and if the inflammation

has extended to the bladder, it becomes totally obstructed; the body is costive, and the pulse is full, hard, and frequent.

“Uterine inflammation is always attended with much danger, particularly where the symptoms are violent, and the proper means for removing them have not been timely employed. In such cases it may terminate either in suppuration, or gangrene and mortification.

“Frequent rigors, succeeded by flushings of the face, quickness and weakness of the pulse, great depression of strength, delirium, and the sudden cessation of pain and soreness in the region of the abdomen, denote a fatal termination: on the contrary, the ensuing of a gentle diarrhœa, a lochial discharge returning in due quantity and quality, the secretion of milk recommencing, and the uterus becoming gradually softer and less tender to the touch, with an abatement of heat and thirst, prognosticate a favorable issue.”

When the difficulty is not connected with delivery, most of the symptoms above described are found to exist, at least to an extent sufficient to fix the location of the disease. A favorable termination, in such cases, is denoted by a gradual abatement of the symptoms, connected with a sero-mucus discharge from the vagina.

**MANAGEMENT.**—The treatment of this complaint should consist of the use of such means as are calculated to remove obstructions, equal-

ize the circulation, and promote sweating. To accomplish these objects, we may commence by placing steaming bricks to the feet, and sides of the patient. In the mean time we may give the following, or some similar preparation, until perspiration is effected—after which it may be followed by a thorough emetic. White root, two table-spoonfuls, ginger and scul-cap, or lady's slipper, each one table-spoonful, lobelia seeds. one teaspoonful; add a quart of boiling water. *Dose*, a teacup two thirds full every half hour until sweating is produced. After the operation of the emetic, the usual quantity of this tea may be taken every hour or two, according to symptoms, to keep up sweating—which should not be allowed to subside until relief is obtained.

The bowels, also, should receive such attention as their situation may demand. They should at least be moved every day with gentle physic or injections.

The vapor bath is of great importance in the treatment of inflammation of the womb, and should be employed whenever the means recommended above fail to sustain the perspiration.

Strong washes formed of cayenne and saleratus, steeped in water, frequently applied to the whole surface, may also assist materially in the cure of this malady.

A mustard plaster may be placed over the region of the womb, and alternated with a bag of hops steeped in vinegar. applied as warm as it can be borne.

The emetic should be repeated every day, or according to circumstances.

A tea of slippery elm injected into the vagina, will likewise assist in allaying the inflammatory excitement, especially when the vagina participates in the evil, which is generally the case; or the vagina may be filled with a poultice of slippery elm, which may be kept to its place by means of a folded cloth and a bandage.

#### CHRONIC INFLAMMATION OF THE WOMB.

In addition to the acute inflammatory affection before described the womb is liable, like other organs, to a chronic derangement of the same kind. This disease has been divided into a number of different varieties by medical writers—as simple inflammation, inflammation with engorgement, catarrhal inflammation with ulceration, inflammation with granulations, &c. These varieties, however, we have not space to describe separately; neither would it be a matter of any great practical benefit, in a work of this kind, were we to do so. We shall therefore be content with giving general symptoms, and general rules for its management under all circumstances.

The symptoms attending this complaint are such as the following: pain in the region of the womb, which is increased by standing or walking, a sensation of heat and smarting in the

pelvis, which frequently extends up one side, weight in the hips and small of the back, a sensation of heat and fulness in the womb, dragging pains in the groins, and pains extending down the thighs. Usually, also, women laboring under this complaint suffer more or less derangement of the menses. In some cases they appear at the usual periods, but last only a short time, and the discharge is pale and watery. In other cases the menses may be delayed for months, and when they do occur, may be accompanied with a hemorrhage, which lasts two or three weeks. During the intervals between menstruating, there usually takes place, a sero-mucus or bloody discharge, of a fœtid character. In addition to these things, more or less general derangement exists, and sympathetic pains are felt in the breast and other parts. Hysterical and other nervous symptoms are manifested, also, with a derangement of the stomach, nausea and vomiting, palpitation, cramp, &c.

These symptoms, however, will not enable us to decide certainly in reference to the precise nature of the difficulty, since most of them exist in prolapsus and other forms of uterine derangement, still, by careful attention, we may form an opinion sufficiently accurate for all practical purposes. It should have been remarked that bearing down of the womb, to some extent at least, usually attends this difficulty.

The causes of this malady are similar to those which produce the foregoing difficulty. Indeed acute inflammation of the womb not unfrequently terminates in a chronic state of the same affection.

MANAGEMENT.—The treatment in chronic inflammation of the womb should be so adapted as to equalize the circulation, allay general and local irritation, and tone up the general system. It may accordingly consist of vapor baths administered every three or four days, occasional emetics of lobelia, with *spice bitters* or other tonics intermediately. In addition to this, stimulating injections, administered to the bowels, will be of service. Stimulating liniment, also, applied to the bowels and extremities, will aid in effecting a cure. Injections to the vagina likewise, as recommended in prolapsus uteri, may be employed.

#### INFLAMMATION OF THE OVARIES AND FALLOPIAN TUBES.

Although the ovaries and fallopian tubes participate more or less, in inflammatory affections of the uterine tissue, yet they are sometimes separately attacked with inflammation, of an acute, or chronic kind.

The causes of this complaint are similar to those which produce inflammation of the womb.

The symptoms of inflammation of the ovaries are: a sense of heat and pain in either side of the pelvic cavity. When both sides are affec-

ted, which is usually the case, two rounded swellings, which are very sensitive to the touch, may be perceived in the region of these organs. These tumors increase, and spread toward each other, as the complaint progresses, until they unite into one swelling under the median line. In addition, the whole abdomen becomes extremely tender, severe pains extend from the swelling to the loins and down the thighs, which parts are the seats of an unusual degree of torpor and weakness. The stomach also, sympathizes with the derangement, and general disturbance becomes manifested.

**MANAGEMENT.**—Same as in inflammation of the womb.

#### RHEUMATISM OF THE WOMB.

The uterus, as well as other parts of the body, is occasionally subject to rheumatism, either independently, or in connection with a general affection of the same nature.

This disease may attack females under all circumstances. When it occurs during pregnancy it is apt to cause contractions of the uterus, and thus occasion abortion.

The causes of this affection are similar to those which produce rheumatic diseases generally.

*Symptoms.*—These are pains of greater or less severity, that move from one part of the uterus to another. Sometimes the pains sud-

denly cease, and then attack some other organ. In connection with these pains there is, generally, a frequent desire to evacuate the urine and stools. The passage of the urine is accompanied with smarting and pain. Sometimes the discharge of the urine and stools is very difficult, or impossible.

This disease generally commences with a slight rigor, which lasts fifteen or twenty minutes. This is succeeded by a fever, which is generally quite severe while the paroxysm of pain continues, but diminishes or entirely ceases during the intervals between the attacks.—While the fever lasts, the pulse is hard and frequent, the face flushed, the tongue red and dry, the thirst great, and the patient agitated and restless. When this complaint occurs during pregnancy it has often been mistaken for labor.

TREATMENT.—This may consist of full *courses of medicine*, the use of means to keep up a constant, and general perspiration, the application of strong liniment over the region of the pain and to the extremities, with such attention to the bowels as they may need. In short the precise treatment recommended in inflammation of the womb will never fail to effect a cure of this difficulty, if properly applied.

It is proper to remark that it is exceedingly difficult, in many instances, to distinguish this disease from inflammation of the womb. This, however, is a matter of little consequence to the

botanic, since his remedies are always harmless, and at the same time aid nature under all forms of disease. Not so with the employer of allopathic remedies. A mistake in *naming* the disease, (and under circumstances where it is impossible, according to the best authorities, to decide positively,) may be fatal to the life of the patient, when treated according to the popular notions of disease. In confirmation of this fact, we may remember that medical writers do not consider rheumatism of the womb a dangerous malady, yet many cases are on record where individuals have been treated for other complaints until they died—when a post mortem examination revealed the true state of the case—rheumatism of the womb mistaken for inflammation—and death by maltreatment. These facts, we repeat, are gathered from medical authors, of distinguished reputation among the advocates of the old school, poisoning system. And is this the boasted science of four thousand years? Is this the glorious certainty in the achievements of modern medicine? Is this such a remedial system as we might expect to emanate from the goodness and wisdom of the Divine Being? Is it characteristic of infinite benevolence, to furnish us with a plan of cure of such singular potency that the slightest mistake—and that too where mistakes are unavoidable—must almost of necessity prove fatal! The Divine Being *has* made provision for the wants of man in this respect. He *has* provided agents

which He *designed* to recover us from our maladies. They are not, however, those deadly poisons which have so long been administered under the name of medicines.

#### CANCER OF THE WOMB.

Females are liable to this complaint during every period of their existence, yet it more frequently occurs about the turn of life.

There are several kinds, or stages of this disease mentioned by writers, yet but little practical benefit would be derived from so minute a description, in a work of this kind, since the same general principles must govern our treatment in every instance.

Cancer of the womb is, in general, slowly developed. It usually manifests itself, at first, in a disagreeable itching sensation, or feeling of heat in the lower part of the abdomen, accompanied with a kind of weight or pressure in the same region. This is gradually followed by irregular pains, that dart across the front bones, and in other directions. At length a gnawing burning sensation becomes fixed in the womb, accompanied with a discharge from the vagina of a disagreeable foetid matter, of various appearances, that usually excoriates every part with which it comes in contact.

In general there is also some derangement of the menses—they being increased, diminished, partially suppressed, or irregular in their re-

turns. Besides this there is generally a leucorrhœal discharge mixed with bloody striæ, a sensation of pressure on the anus, and dragging in the loins and lumbar regions. To these symptoms are added acute and transient pains in different parts of the body, especially in the breasts, which become firmer and larger, attacks of hysterics, and general uneasiness.— Sometimes a tumor exists so large as to render painful and difficult the passage of urine and the stools.

In the early stages of this disease it may generally be cured without much difficulty; but as it advances the cure becomes more and more difficult, and finally impossible. It ought, therefore, to receive prompt attention on its first appearance.

TREATMENT.—In treating cancer of the womb attention to the general system is of the utmost importance. Accordingly, emetics of lobelia and the vapor bath are indispensable. These should be employed every few days according to circumstances, and accompanied with the intermediate use of the usual tonics and stimulants, and means to regulate the bowels.

In addition to these things, detergent or cleansing medicines are indispensable. For a medicine of this class the reader is referred to the *anti-mercurial syrup*, and other compounds of this class, in the latter part of this book.

If the cancer has ulcerated and matter is discharged, great care should be taken to keep the

parts thoroughly cleansed. For this purpose, warm water containing a small quantity of mild soap should be injected into the vagina, two or three times a day, and followed with a decoction of sumach and golden seal. The external parts, also, should be washed with the same fluids.

The diet of persons laboring under this disorder should be light and composed principally of vegetables and milk. Especially should they avoid fat meat, and oily substances.

This treatment persevered in, in the commencement of the disease, will rarely fail to effect a cure; and in all stages it will mitigate its painful symptoms, and retard its progress.

#### DROPSY OF THE WOMB.

Dropsy of the womb is a complaint of rare occurrence, and consequently is but little known; it is nothing but a collection of serous, or seromucus fluid in the cavity of the womb.

The causes of this disorder are supposed to be a feeble constitution debilitated by floodings miscarriages and protracted leucorrhœa, a fall or blow on the abdomen, inflammation of the womb, or any cause capable of keeping the uterus in a state of debility, or protracted irritation. It should be remembered, however, that although these causes may give rise to the secretion of a fluid in the cavity of the womb, yet this disease cannot exist, unless the mouth

of the uterus is closed by being spasmodically contracted, by a membrane, by a polypus tumor, &c.

**SYMPTOMS.**—These are a swelling, which commences just above the os pubis and gradually extends upwards, a sensation of weight in the pelvis, pain in the loins, and sometimes a slight degree of fever. In addition the breasts undergo considerable change—indeed the symptoms, for the first few months, are such that married women universally imagine themselves pregnant.

Dropsy of the womb may be distinguished from pregnancy by an examination per vaginam. In this case the operation of ballottement does not reveal the presence of a fœtus in the womb—but by placing a finger on the cervix uteri, while the other hand is placed on the abdomen over the womb, the presence of a fluid may be ascertained, by the peculiar fluctuation which it communicates.

**TREATMENT.**—This may consist of *courses of medicine*, laxatives, injections of slippery elm and lobelia tea to the vagina, vapor baths, sitting over a steaming vessel, and such attentions to general conditions as may be requisite.

If these means fail, in addition to them, it is recommended to introduce the finger, or an appropriate instrument into the mouth of the uterus, for the purpose of opening the orifice, to permit the escape of the fluid.

This disorder is more frequently met with in pregnant than in non-gravid women. In these cases the abdomen is larger than in simple pregnancy, the motions of the fœtus are obscure, and the child, following the impulsion of the mother's movements, is tilted in every direction in the midst of the waters.

#### POLYPUS OF THE WOMB.

By this term is designated any preturnatural tumor, rising by a base or pedicle from the mucus membrane of the neck, or body of the uterus. These tumors are of various sizes, from that of a hen's egg to an inconceivable bulk.—They sometimes protrude externally, and in other cases are retained in the vaginal passage, or in the uterine cavity. Cases have been mentioned where these tumors weighed eighty or a hundred pounds.

The vagina also, sometimes becomes the seat of a polypus tumor, similar to that described above, and demands the same treatment for its cure.

The causes of polypus, as enumerated by writers, are such as are capable of irritating, or injuring the organs of generation; as excessive venery, the use of instruments and improper manipulations to assist delivery, &c.

The formation of polypus uteri is generally accompanied with a variety of sympathetic symptoms, such as vomiting, disgust, paleness,

a sense of fulness in the pelvis, weight in the abdomen, and dragging pains in the groins and back. The menstruation also is more frequent, and frequently violent hemorrhages ensue.— Sometimes when the tumor is large, it interferes with the passage of urine and the stools.

The existence of polypus can be positively ascertained, only by actual examination. To distinguish it from prolapsus of the womb, it should be remembered that when that organ prolapses, the tumor is small below, and large above; while the reverse is the case in polypus.

MANAGEMENT.—By means of a double canula a ligature may be applied around the neck of the polypus, which will arrest the circulation; and in a few days it will drop off, after which a dressing of healing salve may be applied, if it can be reached.

When these tumors are so situated that the ligature cannot be applied, the general system should be supported by the usual general treatment, such as *courses of medicine*, laxatives, tonics, &c., and if floodings, or other particular difficulties occur, they should be treated as heretofore directed. Women who are troubled with polypus should avoid becoming pregnant.

#### MOLES—OR DEPRAVED CONCEPTION.

These are fleshy or bloody substances, of different sizes from a small nut upwards, and are always the result of conception which, from

some cause, produces a generation disturbed in its formation, and altered in its composition.

There are three varieties of moles described by writers as follows:

1. The *false germ*, or embryonal mole, where the mole does not remain more than two or three months in the womb, and exhibits the usual membranes of the ovum, which are thicker and stronger than the healthy ones, and are filled with a transparent or bloody fluid, amid which are discovered the early lineaments of the embryo.

2. The *fleshy mole* which differs from the preceding, principally in the fact of its being longer retained in the womb. These are larger than the foregoing, and sometimes have a cavity filled with water—in other instances they are compact and solid—and sometimes have incorporated in their mass the remains of an embryo, bones, or even a whole limb.

3. The *hydatid mole* which consists in a degeneration of the placenta, by the development, within its substance, of a number of cysts, separate, or united together like a bunch of grapes.

It is difficult to distinguish the different species of moles from genuine pregnancy, especially during the early months. However, in pregnancy the belly usually becomes flat and less until the end of the second month, whereas, when there is a mole it enlarges from the first, and so continues to the second or third month; after which it usually comes away. If it continues longer it is apt to occasion flooding.

After the period of four months the mole excites no motion in the womb like those of a living child. The weight of the womb also seems heavier and more fatiguing than in real pregnancy, and the woman feels something like a ball falling about within her, as she turns from side to side. She also suffers more from pain in the loins, from difficulty in passing urine, &c., than when pregnant. The signs of pregnancy usually disappear, partially, or wholly, after the fifth month when there is a mole in the womb.

MANAGEMENT.—All that we need do in most cases, is to wait for nature to expel the foreign body from the womb. If at any time floodings occur, they are to be treated as before recommended.

When the mole is expelled, it is done with the same symptoms as in a miscarriage, and requires precisely the same management.

#### HYDATIDS OF THE WOMB.

These morbid productions are generally supposed to be living animals of a low grade—yet it is doubtful whether they possess any independent life, or vitality. Several varieties of these formations are mentioned, but a separate description would be of no practical benefit to our readers.

Hydatids consists of a membrane or bladder filled with a watery fluid—sometimes single, but usually connected together in clusters. In some

instances large numbers of hydatids are seen to float in the fluid contained within a common membrane; in other cases, they are contained one within another in a regular series.

It is very difficult to distinguish hydatids from pregnancy, or dropsy of the womb, during the first months. The womb however does not enlarge as rapidly as in pregnancy, and does not proceed to so great an extent. In most cases the menses are superseded by signs of flooding, which occur irregularly, and are accompanied with severe pain in the uterus. Sooner or later, after having been a prey to severe suffering and loss of blood, the woman is seized with pains like labor, which result in the expulsion of the hydatids, either at once, or at several different times. After their expulsion the woman experiences all the symptoms that usually follow a regular delivery. The treatment throughout should be the same as in the preceding disorder.

#### OVARIAN DROPSY.

The ovaries and fallopian tubes are frequently the seat of dropsical affections, and become so much enlarged as to contain from one to ten or more gallons of water. This kind of dropsy is one of the most common of the encysted dropsies, and is also one of the most ordinary forms of ovarian disease to which females are liable.

In this affection the fluid is contained in a cyst or bladder, which is either single, or compo-

sed of a number of simple cysts connected together, and forming one tumor.

The progress of this disorder is commonly slow; neither is it marked with any very unpleasant symptoms, until so far advanced as to render the tumor visible externally.

Ovarian dropsy exhibits many of the general and local symptoms which attend pregnancy, and other uterine changes. We can generally distinguish this disease from others, however, by remembering that the ovarian tumor commences forming on one side, is circumscribed and pointed, is accompanied with pain and numbness which affect the thigh belonging to the side in which the tumor is situated, and generally presents a gurgling sound upon percussion.—These symptoms will also enable us to distinguish it from *ascites*, or dropsy of the abdomen. We may remember, also, that in ascites, the enlargement is more rapid, and spreads over the whole abdomen, while the fluctuation may be perceived in every part of the tumor—that it is accompanied with marks of languor pervading the whole organism, such as paleness, bloating of the face and limbs, with scanty urine, &c.; whereas in ovarian dropsy the woman retains for a long time her usual healthy complexion, and the urine appears to be more free than common, except in those cases where the cyst becomes so large as to obstruct its discharge, by the pressure which it exerts upon the bladder.

MANAGEMENT.—This is a complaint of exceedingly difficult cure, especially under allopathic treatment; yet it is not beyond the reach of persevering attention, in the majority of cases.

In the management of ovarian dropsy, *emetics of lobelia, and the vapor bath*, are indispensibly important. The emetic should be repeated every week, and the bath daily, or at least once in two days. Besides this, frequent washes should be applied to the surface with considerable friction. Cayenne pills taken before each meal—three at a dose—and composition tea taken several times a day, will assist in the cure.

*Diuretics* also should be employed freely.—For a medicine of this class the reader is referred to the *hydragogue tincture*, and other compounds of this class, in the latter part of this book.

*Hydragogue Cathartics* are highly recommended by some. The following compound forms the best article of that class with which we are acquainted. Take mandrake root, cream tartar, and peppermint, equal parts—pulverize, and mix. *Dose*, a teaspoonful every four hours until it purges. The purge should be repeated once or twice a week.

The application of gentle pressure, by means of a bandage applied over the tumor, is said to be beneficial.

The application of a poultice, made by stewing tobacco leaves in vinegar, is also highly

recommended. It should be applied twice a day, and worn as long as it can be borne.—When the tumor becomes very large, and other means fail, temporary, and sometimes permanent relief may be obtained by the operation of tapping. This operation should be followed with *courses of medicine*, and the use of diuretics, to prevent a re-accumulation of the water.

#### UTERINE SPASM.

It sometimes happens that the unimpregnated womb becomes spasmodically affected, contracting, or drawing itself together with such force as to cause the most acute sufferings. Under these circumstances, if the hand be placed upon the abdomen, the uterus may be distinctly felt, in the form of a hard tumor or lump.

During the uterine spasm the ligaments, also, which are connected with the womb partake of the same influence, to a greater or less extent—and not unfrequently the limbs, and other parts of the body become similarly affected—and paroxysms resembling a fit of hysterics occur, at distinct and separate intervals.

An attack of this kind is frequently preceded by a chill, accompanied with severe pain in the head, neck, &c.—cold feet and legs, low pulse, and a pale bluish cast of the countenance.—These symptoms continue, in a greater or less degree, while the difficulty lasts.

This complaint may be caused by anything that impairs the tone of the stomach, and causes an accumulation of cold slime or vitiated mucus in that organ. It may also be produced by exposure about the time of menstruating—by the use of improper purgatives, and other poisonous medicines.

MANAGEMENT.—The treatment of this difficulty may be commenced by applying steaming bricks to the feet and sides of the patient, together with warm fomentations to the abdomen over the region of the womb.

This may be followed by the free use of some diaphoretic tea, and the *third preparation* in doses of a teaspoonful or two, repeated every few minutes until nausea and vomiting are produced. If the spasm continues, continue the use of the third preparation, so as to keep up protracted nausea, while it lasts.

After the spasm ceases it would be well to administer a thorough course of medicine. The vapor bath would be beneficial, if employed at any state of the difficulty. So also would the free use of a tea formed of blue cohosh and nervine with the addition of cayenne. (See, also, treatment recommended in convulsions.)

#### FUROR UTERINUS, OR NYMPHOMANIA.

There is some disagreement among authors in reference to the primary seat of this disease, some fixing it in the genital organs, others in

the brain. It is certain, however, that it frequently arises from local inflammation of the external organs, or from an acrimony in the fluids of the parts. We have therefore, for the want of any better arrangement, classed it among local diseases of the female organs of generation.

It may be defined an exaggerated, irresistible, and insatiable desire urging the woman to the venereal act.

Women most predisposed to this disorder are those in whom the breasts and all the attributes of puberty have been early developed, young widows, public girls who have been forcibly deprived of venereal pleasures, and ardent women who are married to men of cold and feeble constitutions.

The causes which act directly upon the uterine appendages, are such as solitary indulgence, pruritis, or any thing capable of producing irritation or inflammation of these parts. The causes which primarily affect the brain, and act secondarily upon the sexual organs, are such as disappointed love, the reading of lascivious books, the sight of licentious pictures, frequent visits to balls or theatres accidental sight of amorous interviews, the use of wine, &c.

*Symptoms.*—The woman experiences sexual desires, which are strongest at the menstruating periods, but which, in the commencement of the disease, shame causes her to conceal. As the complaint advances, these desires become stron-

ger, lascivious images constantly fill the mind, the woman becomes sad and melancholy; she loses her appetite and sleep, and seeks for solitude in order to indulge in the thoughts which occupy the mind. In the worst stages of the disease the woman becomes unable to restrain her feelings—and manifests her desires by frequent sighs, by voluptuous attitudes, and finally by complete forgetfulness of all modesty. In some cases the sight of a man excites the most furious desires, and finally when the excitement reaches the highest point she falls in a violent delirium. The violent excitement of such paroxysms has caused death in many instances.

MANAGEMENT.—When there is any local inflammation of the genital organs *courses of medicine* should be resorted to, and the parts washed with cold water. Injections of slippery elm to the vagina are useful when the parts are irritated. See, also the treatment recommended in pruritis.

In addition to the above, all exciting causes should be abandoned at once, and means used to divert the mind from the contemplation of obscene objects. The diet should be cooling and light, consisting principally of vegetables and milk. Marriage has sometimes been recommended as a cure.

#### HYSTERIC5.

This is not properly a local disorder, and is not, therefore, perhaps, appropriately arran-

ged in the class which we are considering.—Still the uterus, or the nervous apparatus of the uterine system, is commonly supposed to be the starting point of the disease; and as we have not a more appropriate division in our plan, we shall be permitted to notice it here.

“As the characters of hysterics are too numerous and variable to allow of our giving a short and precise description of it, we shall rest content with saying, that it consists of a lesion of the uterine apparatus, giving rise to paroxysms devoid of fever, which are manifested less by local symptoms than by a sense of suffocation and strangulation, followed more or less by complete loss of consciousness, and accompanied by convulsive and spasmodic phenomena in the organs of organic life, and the life of relation.”—COLOMBAT.

In addition to what we have quoted from *Colombat*, we remark that this disorder is difficult to describe, since it imitates so many other diseases that it is only by taking an assemblage of all the symptoms, that we can form any just conception of it.

It comes on in paroxysms which are usually preceded by dejection of spirits, anxiety, difficulty of breathing, sickness at the stomach, palpitation of the heart, pain in the left side, with a sense of distention advancing upward until it reaches the throat, occasioning a sensation as if a ball were lodged there. Having reached this height the patient seems threatened with suffo-

cation, becomes faint, and is affected with stupor and insensibility, while at the same time the body is turned to and fro, and the limbs are variously agitated, wild and irregular actions take place amid alternate fits of laughter and crying; incoherent expressions are uttered, a short delirium prevails, a frothy saliva is discharged from the mouth, and sometimes breathing seems to cease.

After the spasm abates a quantity of wind is evacuated upwards with frequent sighing and sobbing, and the woman recovers the exercise of sense and motion, without any knowledge of what passed during the fit.

The symptoms, however, are quite different in different cases. Sometimes there is little or no convulsive movement and the person seems to lie in a profound sleep, without sense or motion; while in other cases hiccough which lasts a day or two, or some other slight spasmodic affection, constitutes the hysteric paroxysm.

Hysteric affections occur more frequently in the single state of life than in the married; and they appear oftener about the period of menstruating than any other. They are readily excited in persons disposed to them, by any sudden passion or emotion as anger, grief, surprise, fright, &c.,

**MANAGEMENT.**—There are two indications to be attended to in treating hysterics. The first is to allay the spasmodic symptoms which constitute the fit. The second is to remove the

cause, and prevent a return of the paroxysm by restoring the general health.

"The treatment in the paroxysm must be commenced by the use of two or three doses of the *anti-spasmodic tincture*, which, after the spasms are relieved, should be followed up with a strong tea of the *nervine tonic*.

"The following tincture is an excellent medicine for this complaint:

Take of imported Valerian,	- - -	1 ounce.
Assafœtida,	- - - - -	1 do
Sculcap,	- - - - -	$\frac{1}{2}$ do

Pulverize and digest in alcohol for ten days and strain; or for immediate use the powders may be boiled in alcohol for ten minutes, when it is fit for use.

"The dose is from a teaspoonful to a table-spoonful. A teaspoonful will do well when the medicine is first commenced, but as the patient becomes accustomed to it, the dose must be increased. This is so excellent a medicine for this complaint that hysterical patients, when once become accustomed to it, will never be without it."—KOST.

The second indication is to be met by the administration of light courses of medicine, with the use of tonics, the vapor bath, and other means, heretofore recommended, to equalize the circulation and restore the general health. If there is any uterine derangement the appropriate treatment for its cure should be applied.

## CHAPTER V.

## PARTURITION—LABOR.

Parturition, or labor, is the last and great function of the uterine system. By it is meant the expulsion of the fœtus and its appendages from the cavity of the womb, and the consequent separation of the child and mother.

It usually occurs, as before remarked, at the end of nine months, forty weeks, or two hundred and eighty days from conception—a few days being allowed for variation either way.

In consequence of the almost exact regularity with which labor takes place, physiologists have invented many theories to account for its occurrence, but as yet no satisfactory cause has been assigned.

Some have supposed that the uterine action is caused by the straggles of the fœtus for the want of room, or sufficient nourishment, or from attempts to breathe; some attribute it to the acrid nature of the liquor amnii—others to the womb having attained its greatest irritability at the precise time of the completion of fœtal development, and other still compare it to the dropping of fruit fully ripe.

Principally all, however, that has been said on the subject, is mere speculation. The causes which operate to produce labor lie hid among the mysteries of our existence. That it is not directly connected with the condition of the womb is evident from the fact that in extra-uterine pregnancy--where the ovum becomes lodged in the cavity of the abdomen, and entirely disconnected with the uterus--females are frequently visited with all the symptoms of parturition at the time when the fœtus has reached its full age.

"But though all search has hitherto failed in discovering the exciting cause of labor, it has established the fact, that the periodicity which we found to characterize the other uterine functions, prevails here also. For example, abortion or premature labor, when not the result of external accidental causes, occurs very generally at a monthly, or what, but for conception, would have been a menstrual period.

"Again, as remarked by Stark and others, the normal period for parturition corresponds to a menstrual period; on this principle Kluge calculates the duration of pregnancy in every case at 280 days, and so much more or less, as impregnation took place immediately before or after menstruation. Speaking generally, labor may be looked for at about the tenth period after the last appearance of the catamenia."

**SYMPTOMS OF LABOR.**—These are as follows:

1. A subsidence or sinking of the abdomen, and consequent lessening of the waist. This usually occurs two or three days—sometimes only a few hours—before the commencement of labor. This is caused by the settling down of the womb into the pelvis, and indicates a healthy condition of those parts.

2. Frequent desire to void the urine or evacuate the bowels constitute one of the common symptoms of approaching labor. This is caused by the pressure of the womb upon the bladder and rectum, which not only affects them mechanically by lessening their capacity—but also causes a degree of irritation, which produces a frequent disposition to an evacuation of their contents.

3. Mucus discharge from the vagina. This usually occurs about twenty four hours before the commencement of labor. It is generally colorless until labor has set in, when it becomes slightly mixed with blood, occasioned by the opening of the os uteri.

4. Painless uterine contractions. “During the last month of pregnancy, and especially towards its termination, patients frequently notice a squeezing sensation in the abdomen, which lasts for a little time, then subsides, and is not attended with pain.”

**PRESENTATION.**—By this is meant the part which presents at the brim of the pelvis. These are, 1st, Presentation of the head. 2d, Of the

breech, including the hips and loins. 3d, Of the inferior extremities, including the knees and feet. 4th, Of the superior extremities, including the shoulder, elbow, and hand.

CLASSIFICATION OF LABOR.—Labor has been divided by medical writers into a variety of classes, varying from three to seven. We think, however, that the simpler the arrangement the better, provided it embrace the whole subject. We shall accordingly follow the divisions of those who make but three classes denominated *natural*, *unnatural*, and *complex* labors.

#### NATURAL LABOR.

“The term *natural labor* is applied to those cases in which the head presents, and descends regularly into the pelvis; where the process is uncomplicated, and concluded by the natural powers within twenty-four hours, (each stage being of due proportion,) with safety to the mother and child, and in which the placenta is expelled in due time.”

There are, however, great variations in the length of time required to complete a labor.—In a large majority of instances the whole process is finished in six hours. Others require a longer period, and in a few cases labor is protracted even to thirty hours or more, with perfect safety to the mother and child. With these remarks we proceed to a description of the process, and proper management of natural labo

**STAGES OF LABOR.**—For the convenience of description, the process of labor is divided into three stages—the first extending from the commencement of labor, to the passage of the child's head through the os uteri—the second from the passage of the child's head through the os uteri, to the birth of the child—and the third from the birth of the child, to the expulsion of the after-birth.

The commencement of labor is dated from the time when the contraction of the womb become painful, provided the whole uterus contracts, and they are regular, and continue without suspension.

The symptoms of the first stage of labor are as follows: The individual complains of severe pains that are generally seated in the back, and extend around to the abdomen and thighs.—These are described as “cutting or grinding pains.” They are short—do not occur very frequently, nor occasion any disposition on the part of the woman to render any assistance, but are difficult to bear, causing her to suspend her business, and give expression to her feelings by groans and loud outcries.

These “cutting and grinding pains” are caused by the opening of the os uteri. During this stage the woman is restless, irritable, depondent, low spirited, and fearful of evil consequences. Not unfrequently the stomach also becomes irritable and vomiting ensues. This is always beneficial, assisting materially in relaxing the mouth of the womb.

During this stage, especially near its close, severe rigors or shiverings occur; not from cold, but as a prelude to a pain.

If an examination be made per vaginam at the commencement of labor, the vagina will be found undilated, but the mouth of the womb slightly open during a pain. As the pains increase the os uteri continues to dilate, slowly at first, but increasing more rapidly towards the close of this stage; the bag of waters protrudes, and finally burst, the head passes through the mouth of the womb, and the *second stage* commences.

During the second stage the character of the pains becomes changed. They are described as "bearing down or forcing pains," occur more frequently, and continue longer; the suffering becomes more general, but the woman is disposed to render assistance by voluntary efforts, which occasions her to hold her breath, and suspend her cries until the end of a pain.

As labor advances the circulation becomes more active—the countenance flushed—the heat of the skin increased—and profuse perspiration takes place. Vomiting, also, frequently happens during this stage.

"If the second stage be prolonged, the woman often feels heavy and sleepy, and may doze between the pains—the result of the fatigue, combined with the congestion about the face and head."

If an *internal* examination be made, the vagina will be found dilatable, and the head of the child occupying the upper part of the pelvis.—This will be found to advance during each pain, and recede somewhat during an intermission, yet on the whole gradually advancing toward the outlet of the pelvis until at length it reaches the perineum, which, together with the external parts becomes distended, and the exertions and sufferings of the woman reach their highest point.

At this point if the pains were continuous, extensive lacerations would undoubtedly occur. But nature is beautifully adapted to the safe accomplishment of its own work. At this stage the pains become frequent, one succeeding another with rapid succession—each one forcing the parts to the utmost point of distension, yet quickly abating, allowing the head to recede for a moment, and again forcing it forward as before, every time gaining upon the one that preceded it. In addition to this, the resistance of the perineum throws the head forward against the os pubis, by which means, in connection with the nature of the pains already described, the advance of the head is retarded until the parts are sufficiently relaxed to admit of its safe and easy exit. After the passage of the head there is a short rest, equivalent to two or three pains—then the uterus acts again, and the body of the child is soon expelled.

“The second stage is now completed; the suffering, which was intense, is exchanged for perfect ease, and the sense of relief is inexpressibly great. If the hand be placed on the abdomen, it will be found flabby, and the uterus large and moderately contracted.”

The *third stage* includes the detachment and expulsion of the after-birth. This is usually accomplished in a few minutes after the birth of the child, though it may be delayed for hours, and even days, without producing any evil consequences. In some instances it is expelled at the same time with the child, but there is generally a short interval of rest after its birth, when slight pains come on, the uterus contracts, and the placenta is detached.

MANAGEMENT OF NATURAL LABOR.—For the purpose of determining whether labor has really commenced or not, the midwife, when called to render assistance, may have reference to the nature of the pains.

*True pains* commence at the lower part of the womb—are first felt in the back, extend gradually to the front—and occur regularly but with increasing frequency—each being somewhat more severe than the preceding one.

On the other hand, those partial efforts of the womb, which produce what are called *false* or *spurious* pains, commence at its upper part, are not accompanied with the cutting or grinding sensations before described, are inefficient, and recur at irregular intervals.

In addition to this, if an examination per vaginam be made, the os uteri will be found somewhat dilated or open—but little at first—yet gradually increasing with each succeeding effort.

Having ascertained the existence of genuine labor, the attention of the midwife should, in the next place, be directed to the *presenting part* of the child.

If an examination be made after the mouth of the womb becomes considerably dilated, the membranes will be perceived, in the form of a sack or bladder filled with water, protruding into the upper part of the vagina. This, by its pressure upon surrounding parts, aids mechanically in the dilatation of the os uteri.

As the pains increase the membranes are pushed forward, until in consequence of extreme distention they burst, and the fluid which they contained escapes. This is the usual time for ascertaining the presenting part, although we may sometimes determine that question while the membranes remain entire. An examination should never be delayed after the discharge of the “waters”—indeed it is best to make it as soon as the pains become severe—lest we permit labor to become so far advanced, that the most convenient time for rectifying a wrong presentation passes unimproved.

It will be remembered that we have defined natural labor as that in which the head presents. The head may be distinguished by its

fontanells or openings, the projection of the nose, the eyes, mouth and chin, and sometimes by the hairy scalp.

There is, however, a distinction, properly made in reference to the position which the head occupies. The most natural and easy one is that in which the vertex or crown presents, having the face downwards, and the belly of the child turned to the back of the mother.

Besides this position, the head may present in a situation directly its opposite, that is, with the back of the child towards the back of the mother—or the face may be turned to one side—or an arm may present with the head, &c.

These variations, however, do not call for any manual interference on the part of the midwife. All that is necessary for her to do is to instruct the woman to change her position occasionally, in order to favor the passage of the head, and at the same time encourage her to have patience under the process, which must necessarily, be somewhat more protracted than when the head presents in the position first described.

Having become satisfied that the head presents, the midwife has little to do but to wait patiently for the efforts of nature to accomplish the final expulsion of the child. An examination, however, should be made occasionally, in order to note the progress of labor, and be prepared to guard the external parts from laceration, and receive the child as soon as it is born.

The next object of attention to the midwife is the *final expulsion of the child*.

It has been remarked already, that the pains increase in frequency and force during the latter part of the second stage. During these pains the head of the child not unfrequently, for a time, seems to stick fast in the pelvis, and the efforts of the woman appear unavailing. No fears need be entertained under these circumstances—but the woman may, if the pains will permit, stand on her feet or change her position—which may assist somewhat in advancing the passage of the child.

During this stage it is usual for the midwife to keep a finger placed to the head of the child, in order to be prepared for its reception. In performing these operations no force should be used—but as the head is protruded, it may be received into the hand of the midwife, and carefully supported in its proper position, so that, while the body is being born, the soft parts of the woman may not be torn.

After the passage of the head there is usually a slight pause in the efforts of the woman, after which the pains return, and the body is expelled. During this pause no attempt should be made to extract the child by force, but we may wait for the efforts of nature to complete the work.

The midwife may, however, ascertain whether the cord is wound round the neck—and if so, disengage it if possible. The face of the child, also, should be disengaged from the membranes, and the mouth and nostrils should be

cleansed, with a finger, lest strangulation happen by its taking into the lungs the mucus, or whatever else may be in the mouth or nostrils.

“When the child breathes and cries strongly, and the pulsation in the umbilical artery ceases tie a small string or large twine round the umbilicus, about a half inch from the place where it ceases to be of the same color as the body of the child, that is, generally about an inch from the body, and another an inch or two from this. Let both be tied twice or three times around, and drawn so closely as to prevent the circulation, but not so as to cut the umbilicus.”

Having tied the cord, it may be severed with a pair of sharp scissors, between the places where it is tied.

Should the child not breathe after being completely discharged, a little cool water may be dashed along the spine or on its breast—or the child may be immersed in water a little more than blood warm. Rubbing the spine or whole surface briskly, yet gently, with a soft flannel, tickling the nose with a feather, blowing into the lungs and pressing out the air, stripping the cord from the mother towards the child, and stimulating injections to the bowels, have all been recommended as means to be used for the restoration of breathing. We should not be discouraged, if the means used are not immediately successful—as children have been recovered after an hours fruitless labor.

Leaving this subject, we return again to the farther management of the woman.

We suppose her safely delivered, and the child given over to the nurse—the next duty devolving upon the midwife, is the management of the after-birth. This is, indeed, sometimes expelled at the same time with the child. Usually, however, it remains for a time, when slight pains return, which end in its detachment and expulsion.

When these pains occur, we may aid somewhat in removing the placenta, by gently pulling upon the cord, with a steady force. In some cases, also, the after birth is expelled from the womb, and is lodged within the vagina, from which it may be removed by means of the gentle traction before recommended. In these cases, if a hand be placed over the womb, it will be found already contracted.

These efforts to remove the placenta will generally prove successful—but should they fail, we are by no means to resort to violence. All we are called upon to do, unless where there is dangerous hemorrhage, is to assist the contraction of the womb by friction over the abdomen, in connection with the gentle traction above recommended. If we do not succeed by these means, the woman should be allowed to rest in bed for a short time, after which a stimulating injection may be administered to the bowels, which will generally accomplish the object.

After the birth of the child it is usual to apply a binder to the abdomen of the patient, to aid in the contraction and support of the parts. This may consist of a broad linnen cloth, so applied as to embrace the hips and whole abdomen—not very tight—yet with a moderate degree of firmness.

It should have been remarked, also, that it is best to change the dress of the patient, when necessary, and put her to bed before applying the bandage. In doing these things she should not be allowed to exert herself, but should depend altogether upon the assistants to make such arrangements as are necessary.

Before leaving this hasty notice of natural labor, we will offer a few remarks upon one or two other subjects connected with the duties of the midwife. The first is the *position for delivery*

This has varied in different times, and still varies in different countries. We will, therefore proceed to describe some of the positions commonly adopted, at the same time remarking that the patient may, as a general thing, be allowed to follow her own inclinations in this respect.

In some instances women have been delivered in bed, either lying on the back with the hips elevated, or on the left side, with the hips near the edge of the bed, and the knees drawn up and separated by having a pillow placed between them. The latter position is the one

adopted, generally, in England. When the patient is delivered in bed, it should be guarded against being soiled, by having several folded blankets placed under her. In both the above positions the woman should be allowed to grasp a sheet fastened to the bed post, or the hand of an assistant, during the pains.

The following we esteem as a very convenient position for delivery :—A seat is prepared on the bed, by having a folded blanket or two placed so as to hang over its edge, the feather bed being turned back to assist in furnishing support to the back of the patient, or her husband, or an attendant, may be seated at her back for this purpose. In this position, she should be placed as near the edge of the bed as possible, having her feet supported by two chairs, so far apart as to permit the chair of the midwife to be placed between them. An attendant may be seated on each chair, to keep them in place, and grasp the hands of the patient during a pain.

The kneeling posture, also, is highly esteemed by many, as a favorable position for delivery. Indeed, it not unfrequently happens that a tedious labor is speedily accomplished by a change to this position. When this posture is adopted, the woman may rest on her knees before a chair, having a pillow placed on it for the elbows to rest on, while she grasps the back with her hands.

When labor lingers, a change of position will frequently assist in expediting the business.

*Medical treatment of the woman during labor.*—

As a general thing little need be done in this respect. If the patient has been properly managed during gestation, and the efforts of nature are not interfered with in the act of parturition, she will, in a vast majority of instances, escape those disagreeable and perplexing difficulties, which sometimes occur under fashionable treatment.

Still, the midwife may sometimes find it convenient to render some assistance, by administering medicine.

The first circumstance that may demand any attention of this kind, is usually connected with the nature of the pains. If they are irregular, or inefficient, and we are uncertain whether labor has commenced or not, something may be done to remove them if they are spurious, or assist them if they are real. For this purpose a tea of tansy and cayenne, combined, or used separately, may be employed to good advantage. So also may composition, and a variety of other warming medicines. Dr. Thomson highly recommends a tea of red raspberry leaves, combined with cayenne. Whatever may be advised should be employed freely, and aided by other means to produce perspiration. This treatment will seldom fail to relieve false pains, or encourage those which are real.

Should labor progress slowly in consequence of the rigidity of the parts, enough lobelia may be added to the other medicines, to create con-

siderable nausea, which will assist in producing speedy relaxation. Sitting over steam, or applying cloths dipped in water as warm as can be borne, will be found of service if the external parts are sore, inflamed, or rigid.

Should the woman become exhausted and faint during labor, cayenne tea may be given in full doses. Should cramps or convulsions take place, they are to be treated as heretofore directed. Not unfrequently, a full course of medicine has been found to remove those difficulties, which sometimes happen during labor, and render the birth of the child safe and easy.

It should have been remarked, also, that some attention to the condition of the bowels may be necessary. If they are costive, or have not been recently moved, an injection should be administered, soon after the commencement of labor. The woman should also be instructed to obey the calls of nature at all times, as injury might arise from the retention of urine, or the stools.

Before leaving this subject it is proper to remark, that dangerous consequences, such as flooding, bleeding, inflammation of the womb, child bed fever &c., may always be prevented, by simply keeping the woman in a gentle perspiration during labor, and for two or three days subsequently.

## UNNATURAL LABOR.

By this is meant any variation from natural labor, in respect to the time required for its completion, the kind of presentation, the obstructions to its termination, &c. There are several varieties of unnatural labor mentioned by writers. We will notice them in the order adopted by Dr. Churchill.

**TEDIOUS LABOR.**—In this kind of labor the head presents, and the child is born without assistance, but the labor is prolonged more than twenty-four hours, from causes which occasion delay in the *first stage*.

In this kind of labor the pains are short, seated in front, feeble, and produce but little effect upon the bag of membranes, or cervix uteri. On examination the head will be found not to have passed through the os uteri.

*Treatment.*—The treatment before recommended, as cayenne and tansy tea, or compotition, tea of red raspberry leaves and cayenne, &c., may be employed. In addition, stimulating injections to the bowels, will aid in producing efficient uterine action. If these means do not succeed, a course of medicine may be administered—or at least nauseating doses of lobelia may be given. This kind of labor, though protracted, uniformly terminates with safety to the mother and child, unless danger arise from some other cause.

**POWERLESS LABOR.**—By this term is meant labor which is prolonged in the second stage, or after the head has passed through the os uteri, by causes which operate on the uterine power, rendering the pains feeble, or totally suppressing them.

The consequences of delay in the second stage are much more dangerous than when it takes place in the first, especially to the child. It may be remarked, however, that powerless labor, as it is called, will seldom or never occur under proper management.

The second stage may continue for a considerable length of time without any bad symptoms. But, as a general thing, writers tell us, when it is protracted beyond twelve or fourteen hours, symptoms of constitutional suffering become manifested.

The symptoms attending this kind of protracted labor are described as follows: the pains, which had been regular and powerful, become irregular and feeble, and finally the bearing down effort ceases, and the pains and outcry of the woman resemble those of the first stage, just as though the labor had retrograded.

Other symptoms follow. The patient becomes restless, frequently tossing about her arms, and changing her position, the skin is hot, severe shiverings resembling a slight convulsion take place, vomiting becomes severe, and green, bilious, or dark colored matter is ejected from the stomach. These symptoms increase in se-

verity according as the condition continues, the pulse becomes rapid and feeble; the skin covered with a cold clammy sweat, the patient becomes stupid, and delirious, and, if relief be not obtained, death ultimately closes the scene.

The causes of this kind of labor, as enumerated by writers, are such as the following : powerless condition of the uterus arising from a weak constitution, mental emotion, diseases of the uterine, &c. These causes, however, as a general thing, are merely hypothetical. The writers that we have referred to admit that this kind of labor seldom occurs, except among persons who have been badly managed. We are, therefore, prepared to give the common cause of the difficulty, which is nothing else than the regular maltreatment of women, during pregnancy and parturition, by bleeding, poisoning, officious interference, &c.

*Management.*—In the first place let those who wish to escape the dangers above enumerated, avoid blood letting and other means of reducing their vitality, either while pregnant, or upon the bed of parturition. In the second place let them adopt the plan of management before recommended, during pregnancy, and trust nature to perform her own work.

Should any difficulties arise, however, from protracted labor in the second stage, the treatment recommended in tedious labor, including the course of medicine may be adopted. It should be remembered, that the mere circum

stance of labor being prolonged, is not a matter of any serious importance, unless it give rise to the symptoms above mentioned.

**OBSTRUCTED LABOR.**—In this case labor is impeded by some mechanical obstruction in the passages, connected with the soft parts, which by causing delay in the second stage, produces symptoms similar to those last described.

*Causes.*—The causes of obstructed labor are scirrhus of the uterus, narrow vagina, tumors in the pelvis, vaginal hernia, swelling of the soft parts, deformity of the pelvis, &c.

*Management.*—When the obstruction proceeds from the first two causes mentioned, time, in connection with nauseating doses of lobelia, or the course of medicine, will usually overcome the difficulty.

In some instances, also, where there are tumors in the pelvis, we may safely trust to the powers of nature to overcome the difficulty. This may be the case when the tumor is small, compressible, or easily moved to one side.

When the tumor is large and movable it may, if possible, be raised above the brim of the pelvis in an interval between the pains, and held there until the head enters the brim.

Polypus and some other kinds of tumors, may have a ligature passed around their base, and may be removed. Sometimes the tumor contains a fluid which may be discharged by making an opening with an appropriate instrument.

When there is a vaginal hernia, it should be reduced in the manner heretofore pointed out.

Swellings of the soft parts are to be reduced by warm fomentations, hip bath, &c., as before recommended.

Cases of deformity of the pelvis, of such a nature as to prevent delivery by the powers of nature alone, rarely occur.

When the pelvis is so narrow as to render the passage of the child impossible without assistance, instrumental delivery may be resorted to.

We remark again before leaving the subject, however, that cases requiring instrumental assistance are exceedingly rare. Nature not unfrequently will succeed in overcoming seeming impossibilities; and force should never be resorted to, until we are fully satisfied of its absolute necessity.

**MAL PRESENTATION.**—By this is meant the presentation of any other part but the head. The usual presentations of this kind are—breech presentations, presentations of the inferior extremities, presentations of the superior extremities, compound presentations, when two or more parts present at the brim.

**PRESENTATION OF THE BREECH.**—The breech may present in different positions, but, as it enters the brim, it always arranges itself so that the back of the child is turned towards the belly of the mother—or towards her back.

The breech of the child may be distinguished by its roundness and softness, by the clefts between the buttocks, by the arms, and by the organs of generation.

The duration of labor in this presentation, is generally longer than when the head presents.

*Management.*—Having ascertained that the breech presents, the midwife should carefully avoid all interference, until the breech is pushed through the external parts. It should be remembered that the danger to the child, is just in proportion to the rapidity with which the first stages of labor are accomplished. The reason is, the head is larger than the other parts, and if they pass through rapidly, the passages are not sufficiently dilated, so that the head is retained after the rest of the child is born—in consequence of which its life is endangered.

To guard against danger, therefore, from this source, the breech should be permitted to pass gradually and slowly, so as to sufficiently dilate the soft parts.

When the chest is pushed through the external parts, the arms may offer a slight difficulty. "If they are above the side of the head, they may be brought down by passing a finger or two over the shoulder as near to the elbow as possible, and then drawing it across the face and chest until the elbow arrives at the external orifice; having extracted one, the other is easily liberated, and it is generally easier to begin with the one nearest the perineum." In bringing down the arms care must be taken not to do it suddenly or violently, or they may be broken.

The danger in this case arises from the pressure which is exerted upon the cord after the

lower part of the body is born. To avoid this danger the cord, as soon as it appears, should be pulled down a little, and removed as much out of the way of pressure as possible.

**PRESENTATION OF THE INFERIOR EXTREMITIES.**—Under this head is included presentations of one or both of the knees or feet. When the knees present, they are always changed into footling cases as the labor advances.

*Management* —Precisely the same as in breech presentations.

**PRESENTATION OF THE SUPERIOR EXTREMITIES.**—“In almost all cases of this kind it is the shoulder which primarily presents, and afterward the arm prolapses; occasionally, however, we find the hand at the beginning of the labor at the os uteri, and more rarely the elbow.” The back of the child is always turned towards the spine, or abdomen of the mother.

This is the most difficult position in which the child can possibly present, and delivery under such circumstances is impracticable, without assistance, in the majority of instances.

In this presentation the hand may be distinguished from the foot by its shortness, the length of the fingers, the situation of the thumb, &c. The situation of the thumb and the palm of the hand, may also enable us to determine which hand presents.

**TREATMENT.**—“As (with very few exceptions) the labor is impracticable, and we have noth-

ing to expect from the natural efforts, except an increase of difficulty, it becomes our duty to interfere promptly in every case. Should the mal presentation have been detected before the rupture of the membranes, and before the os uteri is fully dilated, we may wait for a time to allow of as complete dilatation as possible, nor is there any risk so long as the membranes are entire. But if they have given way, we ought not, and if the os uteri be fully dilated, (whether the membranes be entire or not,) we must not wait a moment, but proceed to deliver by turning. When the liquor amnii has not escaped there is seldom any difficulty, but after that event we generally find the uterus more or less strongly contracted upon the child, and in proportion to this contraction is the difficulty. If the uterine action be very intense, the operation may be impossible without risk of rupturing the uterus; and in such cases instead of proceeding at once to turn, "a dose of lobelia may be given to produce severe nausea, to moderate, or suspend uterine action, and admit the introduction of the hand.

The most proper time for the operation of turning, which should be by bringing down the feet, is immediately after the rupture of the membranes. In some instances it may be done before the waters are discharged.

"If the os uteri be dilatable, the sooner the attempt is made after the escape of the waters, the better. Gardien says that the most favorable moment is just when the waters break."

*Method of Operating.*—The bowels and bladder having been emptied, the patient is to be placed in a convenient posture, similar to that for delivery. The hand should then be well oiled, and inserted edgeways through the *os externum*, during an interval of pain. When the hand is in the vagina, the ends of the fingers are to be brought together so that it may more readily be introduced through the *os uteri*.

After the hand is in the uterus an examination should be made as to the position of the child's body. "Having ascertained all about it, the hand is to be passed over the *front* (chest and belly) of the child, as it is generally in front that we meet with the feet. It is often a matter of difficulty to reach these, as well from the distance to be traversed as from the contraction of the uterus.

"This part of the operation should be slowly and gently performed, resting occasionally and keeping the hand quite still and flat upon the body of the child during a pain, so as to avoid both injury to the mother and great pain to ourselves from the violence of the uterine contractions."

Having found one or both of the inferior extremities, we may be satisfied that we have not mistaken a hand for a foot, after which we may proceed, during an interval between the pains, to draw one or both of the feet out with a waving motion slowly into the perine.

“While withdrawing the hand from the uterus the waters of the ovum flow away, and the uterus being emptied by the evacuation of these, and the extraction of the inferior extremities, we must wait till it has contracted, and on the accession of a pain the feet must be brought lower, till they are at length cleared through the os externum.”

Another mode of turning is recommended by some as superior to the foregoing. It is simply to bring down the knees, by hooking a finger into their flexure. The advantages of this method are—the hand has not to be pushed so far into the uterus, is more protected against the violence of the uterine contraction, and retains a better hold upon the child—and it is said the turning is morereadily accomplished.

Whatever mode of turning may be adopted, it is not necessary to interfere at all with the presenting arm—this, as the feet or knees are brought down, will, of its own accord, be drawn back into the uterus.

The physician or midwife, who may be called to a case of arm presentation when the waters have been a long time discharged, and the uterus is closely contracted on the child, should not attempt turning until the uterine action is quieted, and a proper degree of relaxation is effected. To accomplish these objects, lobelia may be given in doses sufficient to produce nausea and vomiting.

PLURAL BIRTHS.—Women not unfrequently bear twins, and instances are on record where three, four, and even five, children have been born at a single birth. In these cases each child possesses its special envelopes, and a separate placenta.

In labor with twins, the presentation of either child may be natural, or otherwise, and must be managed accordingly, as in labor with a single child.

MANAGEMENT.—As before remarked, different presentations are to be treated as in labor with a single child.

After the birth of the first child, there is usually an interval of rest, when the pains return, and the second child is born. This interval does not generally extend beyond a few minutes, though instances have been known, where hours, or even days and weeks, have intervened between the births. During this interval all we need do for the woman in ordinary cases, is to support her strength by giving *composition*, the *anodyne powders* or some similar medicine.

The placenta of the first child is not to be removed, but we may wait for both to be expelled together, after the second birth.

When there are more than two children, the same principles must govern our treatment, as in cases of twins.

## COMPLEX LABOR.

This labor may be either natural or unnatural as far as presentation is concerned. The term arises from the fact of labor being complicated with some other difficulty.

**PROLAPSE OF THE FUNIS UMBILICUS.**—The umbilical cord may prolapse (fall down) alone, or in connection with the presenting part, and at the commencement, or during the course of labor.

“This accident has no influence whatever upon the progress of labor, but a very serious one upon the life of the child; and any interference which may be advised is for the purpose of rescuing it from peril.” The danger to the child arises from the pressure upon the cord, by which the circulation between it and the mother is arrested.

**Management.**—Various methods have been proposed to obviate the danger which exists in this case—as pushing up the cord and retaining it, with a finger, above the brim of the pelvis, until the upper outlet be filled by the descending head. This rarely succeeds. It has also been recommended to return the cord, and hook it over the limbs of the child. The success of this plan is also doubtful. Others have recommended inclosing the prolapsed cord in a leather or linnen bag, and pushing it beyond the head of the child, and others still have fastened it to the

end of a catheter, or some similar instrument, by which it was returned above the presenting part. In addition to these plans, some have saved the child by placing the cord in the angle formed by the sacrum and hip bones, where it is partially guarded from pressure.

**RETENTION OF THE PLACENTA.**—In some instances the placenta, which usually comes away within a short time after the birth of the child, is retained for a considerable length of time. We do not believe, however, that any dangerous consequences need follow from its remaining, although it be retained until it putrifies and comes away by piece-meal. At least there is danger of more injury being done by its forcible removal, than by allowing it to remain. We have known it to be retained two days or more, not only without danger, but in connection with a more than usually favorable convalescence. Cases are also on record, where it has remained for two or three weeks without any injury.

**Management.**—In addition to what was said about the management of the after-birth in the notice of natural labor, we add, that where the placenta is retained any length of time, we should pay particular attention to the condition of the woman, so as to guard against a tendency to any of the diseases, to which females are liable after delivery. Warming medicine, in connection with nervines, and means to regulate the bowels, and promote perspiration, constitute the agents necessary to be employed in such cases.

FLOODING.—Labor is sometimes complicated with flooding, which may occur at the time of delivery, or subsequently to the birth of the child. The method of treating this difficulty has been pointed out already.

CONVULSIONS.—This is another difficulty which sometimes occurs during labor, and has been noticed before.

LACERATIONS.—Ruptures of the uterus, lacerations of the vagina, perineum, &c., are mentioned as among the difficulties with which labor is sometimes complicated. We shall, however, take no further notice of them at this time, since they almost uniformly occur as the consequences of mismanagement. Our advice is, avoid force, and aid nature in the way heretofore pointed out, and these difficulties will disappear from obstetrical practice.

## CHAPTER VI.

## DISEASES OF THE PUERPERAL STATE.

Although parturition is a perfectly natural process and cannot be considered in any sense as a disease, yet it sometimes gives rise to serious difficulties, and has been known to be followed by fatal consequences.

It is true, however, that in a vast majority of instances the dangers encountered during, and immediately subsequent to, the parturient effort, result from the pernicious practice of the heretofore prevailing systems of medicine, and that nature alone, when not hindered in her operations, is, as a general thing, competent to safely discharge all her offices.

For ages past, woman has been made the subject of the most reckless, and cruel experiments, and the victim of the most savage barbarities—and all under the color of rendering medical assistance.

If any are disposed to doubt this statement, we refer them to the records of medicine. If such an investigation will not make "humanity weep," we know of nothing that can.

Had we space, we would gladly enlarge on this subject, and spread before our readers such testimonies as we have within our reach. We could present an array of evidence, that would hardly fail to excite indignation in the bosom of all who prize virtue, or sympathize with the subjects of affliction.

Before leaving this subject we remark, that females who treat themselves according to the general principles of the botanic system—shun poison and blood-letting—and reject interference with the efforts of nature, have little to fear in fulfilling the duties of bearing and rearing offspring.

#### FLOODING AND FAINTING.

“When either of those circumstances occur at child birth, they may be regarded as somewhat dangerous. Fainting sometimes takes place apparently from mere exhaustion, whilst at other times it is consequent on flooding—The flooding may either discover itself by a discharge of blood externally from the vagina, or it may be retained in the womb; and in either case it may prove suddenly fatal if not quickly stopped.

“Instances indeed have occurred, in which sudden death followed fainting without any flow of blood, either externally or internally, or any other discoverable cause; but occurrences of this kind are very rare.”—*Howard*.

**TREATMENT.**—Whenever these difficulties occur after delivery, we have cause to be alarmed; and active measures to give relief should be adopted without delay.

The appropriate treatment has been pointed out while treating of abortion, and therefore need not be recapitulated here.

We will, accordingly, only remark that it consists of prompt and persevering use of cayenne, in connection with astringents, and means to equalize the circulation and produce sweating.

#### AFTER-PAINS.

These are sometimes exceedingly troublesome, especially after a speedy delivery. Women suffer less with their first children, than with subsequent ones. These pains are supposed to be caused by the efforts of the womb to expel clots of blood formed within it, and are always aggravated by putting the child to the breast.

**MANAGEMENT.**—All that is necessary, in general, to relieve these distressing pains, is to give freely of composition, or some other warming diaphoretic tea—place a steaming brick to the feet and another to the bowels of the patient, and keep up a gentle perspiration. Should these means not succeed, a woollen cloth may be wrung out of vinegar in which strong cayenne has been steeped, and laid warm over the abdomen.

The following preparation will generally

give prompt relief. Take of tinct. camphor, tinct. assasætida and tinct. English valerian. or scul-cap, equal parts, and shake together in a vial. *Dose*, a teaspoonful or more, repeated according to circumstances.

#### IRREGULARITIES OF THE LOCHIAL DISCHARGE.

By the term lochia is meant the bloody discharge, which takes place from the womb for several days subsequent to delivery.

This may be suppressed too soon, or may be excessive in quantity, or of bad quality, and offensive in consequence of becoming fætid.

When excessive it is in consequence of the imperfect contraction of the womb, and when suppressed it is generally in consequence of taking cold.

The suppression of the lochia, if not speedily relieved, is attended with much danger. The consequences are, fever, inflammation and severe pain.

**MANAGEMENT.**—When the discharge is excessive, give cayenne and beth root, or some other astringent. The composition tea, with other means to produce sweating, will generally prove sufficient.

When it is suppressed, give composition tea containing lobelia enough to produce nausea, and place warm bricks to the feet and bowels of the patient. Persevere in this treatment until free and general perspiration can be main-

tained. Applications to the abdomen, as recommended in inflammation of the womb, and stimulating injections to the vagina and bowels, will be found of service.

In addition to the above, the course of medicine, or at least an emetic of lobelia, should be employed, if necessary, and repeated according to circumstances.

The above general treatment will also regulate the lochial discharge when it is of a vitiated quality.

#### COSTIVENESS.

Women after delivery are always liable to costiveness. This should always be attended to, and the bowels relieved daily with injections.

#### MILK FEVER.

“Two or three days after delivery, the breasts become distended with milk, whilst the discharge from the womb at the same is diminished. This is apt to be attended by feverish symptoms, such as head ache, thirst, heat, and quickness of pulse; and is known by the name of milk fever.”

TREATMENT.—To prevent a too sudden and copious secretion of milk, the child should be put to the breast as soon after delivery as convenient.

In addition to this, the breasts may be bathed with *third preparation* mixed with an equal quantity of sweet oil, and shaken together.

If any degree of fever arise, means should be used to cause sweating, as before described, and enough lobelia may be added to the other medicines to occasion nausea.

The breasts should be frequently drawn, since the accumulation of milk may give rise to swelling and inflammation.

#### SWELLED LEG.

"By this title, or by that of *phlegmasia alba dolens*, is understood an acute and very painful swelling of the inferior extremities, which sometimes affects women in the lying-in. This inflammatory swelling, which rarely involves both limbs at once, is attended with fever or considerable violence, which in some instances takes on an adynamic or typhoid character." This disease in common parlance is called the *milk leg*.

*Causes.*—"Among the causes that give rise to it, should be comprised all those circumstances that obstruct the venous circulation of the lower extremities, by causing, to a certain extent, the blood to coagulate within the vessels that happen to be attacked with inflammation; thus pressure exerted upon the nerves and veins in the pelvis," inflammation of the veins in the uterus and pelvis, &c. "Moreover, a sudden

chilling of the body, following the copious perspiration which almost every woman in labor has, is one of the commonest among the determining causes of *phlegmasia dolens*."

In reference to this complaint Dr. Hooper remarks as follows:—"From an attentive consideration of the whole of the phenomena observable in this disease, and of its remote causes and cure, no doubt remains, Dr. Hull thinks, that the *proximate* cause consists in an inflammatory affection, producing suddenly, a considerable effusion of serum and coagulable lymph from the exhalents into the cellular membrane of the lymph."

The *prelispousing causes*, as mentioned by Hooper, are 1st, The increased irritability and disposition to inflammation which prevail during pregnancy, and after parturition. 2d, The overdistended, or relaxed state of the blood vessels of the inferior part of the trunk and lower extremities, produced during the latter months of utero-gestation,

"The malady generally comes on with a chill followed by intense fever, and by sudden pain in the groin and thigh, which gradually swells from above downwards, and mostly upon its inner and anterior surface."

The swelling does not, however, commence invariably at the upper part of the limb, but has been known to begin at the foot, the middle of the leg, the knee, &c. Wherever it begins it is generally soon diffused over the whole

limb, which becomes whiter than usual, hot, excessively tense, glistening, and tender when touched. It does not pit upon pressure except upon the points which are not painful. It is worthy of notice, that when only one leg is affected, the swelling is so entirely confined to the genitals of that side, that if a line were drawn from the navel to the anus, it would never extend beyond it.

Phlegmasia dolens is not generally fatal, but if improperly treated, or neglected, it is apt to be tedious and slow of cure.

MANAGEMENT.—The treatment of this complaint must, obviously, be both general and local in its nature.

The general treatment must be adapted to the existing symptoms. If the disease be complicated with inflammation of the womb, puerperal fever, or any other complaint, or if the disturbance attending this disease be considerable, a course of medicine should be administered, and repeated as circumstances may require.

In addition to this, means should be used to keep up a general and free perspiration, as long as the febrile and inflammatory symptoms continue. For this purpose composition tea with the addition of *secale*, and *lobelia* enough to produce nausea, may be used. A tea of white root, with the addition of cayenne and *lobelia*, may be used as a substitute for the above.

The whole surface should be washed with an

alkaline wash, two or three times a day (especially if there is much fever) and a warm brick should be kept to the feet, to aid in sustaining the perspiration.

The vapor bath, which may be administered while the patient is in bed, is a valuable agent in the cure of this complaint. It may be used at discretion.

The bowels should be occasionally evacuated with mild laxatives, aided by injections.

After the febrile symptoms are subsided, tonics may be employed. The *spice bitters*, or some other preparation of similar character, may be employed as a medicine of this class.

The local treatment next demands our attention. When the labium, or other parts, are subject to much pain and inflammation, they may be fomented with flannel cloths wrung out in hot vinegar in which hops have been steeped, renewing them as often as they become cool.

Poultices of slippery elm and lobelia spread thick, and laid on warm, are also very valuable in reducing the inflammation and swelling.

When the inflammation has ceased, the limb may be bathed freely with some stimulating liniment; and it may be slightly bandaged.

#### MILIARY ERUPTION.

Lying-in women are subject to miliary eruptions, which are sometimes accompanied with some degree of fever. Sometimes they are dispersed over the whole body, but they are more

frequently seen about the neck, chest, abdomen and wrists.

They are characterized by white pimples, which are followed by transparent vesicles filled with a colorless fluid. These vesicles are, however, sometimes surrounded with a reddish circle. The eruption generally goes off by degrees, and disappears in five or six days.

TREATMENT.—If the disease is mild, nothing is needed but an occasional dose of composition tea, together with care in avoiding exposure to cold air, and other things which may cause the eruptions to strike in suddenly.

Should the eruption suddenly disappear, lobelia may be added to the composition, and other means to produce sweating may be employed.

#### EXCORIATIONS OF THE NIPPLES.

“From the constant moisture in which these parts are kept by those who give suck, such occurrences are very apt to happen. When excoriations do arise, the parts should be washed several times a day with a solution of the vegetable astringents.

“To prevent the sore from being aggravated by sticking to the woman's clothes, a little cup made of wax may be laid over the nipple, which is the part most apt to suffer. If only one nipple is affected, the child may be confined to the other; but if both are affected, and the pain occasioned by its sucking are too great to be borne, the woman must then desist from the

duties of a mother until the excoriations are somewhat healed, taking care, however, to have her breasts drawn regularly twice or thrice a day."

## SWELLED BREASTS.

"This disease is easily known by the pain, hardness, and swelling which accompany it. In some cases the whole breast appears to be affected, in others only one side, and in some the affection will be small and superficial."

In inflammation of the breasts, it is evident that a retention of the milk must increase the difficulty. It is, therefore, important to have them regularly drawn by the child, or by some other means. Should the milk not come away without difficulty and great pain, a poultice of slippery elm and lobelia with the addition of cayenne or ginger, may be applied before attempting to have them drawn.

The same general treatment, also, as heretofore recommended in other kinds of inflammation, is equally applicable here. It is, therefore, only necessary to remark that the means to keep up a continued perspiration, with mild aperients, or injections, and the course of medicine if needed, constitute our most reliable resources in this malady.

In addition to the poultice above mentioned, (which should be applied over the whole swelling and frequently changed,) the breast affec-

ted may be rubbed freely with a liniment, made by shaking together in a viol equal quantities of *third preparation* and sweet oil.

Should every effort to arrest the progress of the inflammation fail, and suppuration take place, the breast may be opened with a lancet at the place where the abscess comes nearest the surface. After the matter is discharged, a tent covered with salve may be kept in the opening, and the poultice or liniment continued until the swelling is entirely removed. The abscess should also be syringed out every day with mild soap suds, or infusion of blood root, and followed by a tea of sumach, or some other astringent, containing a small quantity of the tincture of myrrh.

#### INFLAMMATION OF THE WOMB.

This disease sometimes occurs after delivery in consequence of mismanagement, neglect, or some other cause, and should receive prompt and persevering attention. The appropriate treatment has been described already.

#### INFLAMMATION OF THE PERITONEUM.

The peritoneum is the membrane that incloses the contents of the abdomen. This membrane is liable to inflammation, from the same causes which produce inflammation of the womb after delivery.

*Symptoms.*—Rigors and shiverings, followed by thirst, fever, an accelerated pulse, swelling of the abdomen, and exquisite pain and soreness that causes the woman to lay on her back with her knees bent in towards her belly, sickness at the stomach with vomiting of bilious matter, constant inclination to void the urine which comes away in small quantities, difficulty of breathing, a suppression of the lochia, &c.

*MANAGEMENT.*—Same as in inflammation of the womb.

#### PUERPERAL FEVER.

“Great soreness, pain and tension of the abdomen, short anxious breathing, uncommon quickness of the pulse, increased temperature of the body, tensive pain over the forehead, peculiar wildness of the eyes, prostration of the vital powers, suppression or diminution of the milk and lochia, and flaccid state of the breasts, and an unnatural condition of the excrements, accompanied by diarrhœa, may be regarded as the pathognomic symptoms of puerperal fever. Its epidemical prevalence at times, is a sufficient characteristic of its nature, because this circumstance never takes place with respect to simple inflammation of the uterus and peritoneum.”

This disease is peculiar to women after delivery, particularly in hospitals, and is supposed to occasion the death of nearly one-half of those who die in child-bed.

Great diversity of opinion prevails in reference to its nature, as well as the causes which produce it. Some have regarded it only as an ordinary fever, modified by the particular circumstances existing at the time, and not as a particular genus, as contended by others. Others again have considered it as inflammation of the uterus and peritoneum, accompanied with fever of a typhoid character. This last view is probably, in a great measure, correct, this disease differing from inflammation of those parts only in the violence of the accompanying fever.

This disease is said to prevail epidemically, and there seems to be evidences of its having been communicated by contagion under certain circumstances.

The usual time for the commencement of puerperal fever, is the third or fourth day after delivery, although it sometimes occurs at an earlier or later period.

The general symptoms are the same with those described under the heads of inflammation of the womb, and inflammation of the peritoneum, yet being generally more severe and aggravated.

"The appearance of the lochia, and a gradual subsidence of the abdominal tension and soreness after copious stools, the pulse at the same time becoming slower, with a moist skin, may be regarded in a very favorable light. On the contrary, an agitated countenance, with a hurried unconnected manner of speaking, constant

sighing, attended with a tossing about of the arms, pain and oppression at the chest, visual deceptions, imagining strange sounds and voices, muttering and stupor, are to be considered as unfavorable symptoms. An extensive swelling of the belly, so as to sound on striking it with the fingers, sudden cessation of pain, irregularity in the pulse, coldness in the extremities, clammy moisture diffused over the whole body, frequent dark-colored and fœtid evacuations by stool, and an indifference to all external objects, denote speedy and certain death."

MANAGEMENT.—The remediate measures, proper to be adopted in the cure of puerperal fever, cannot differ essentially from those heretofore recommended in inflammation of the womb.

The nauseating tea advised in inflammation of the womb, should be employed to promote sweating, which should not be allowed to subside until the disease has passed its crisis.

The bowels should be regulated by the use of injections.

Frequent injections to the vagina, of warm water followed by a tea of slippery elm, will be beneficial.

The applications to the abdomen and surface, recommended in inflammation of the womb, should be perseveringly applied.

Attention to cleanliness, both as regards the person and bed of the patient, is of indispenible necessity.

"When the disease prevails as an epidemic among puerperal women, all communication ought immediately to be cut off between those who are affected and such as have lately lain in, or expect shortly to do so."

WEED.

"The ephemera, or weed, as it has been called, is a fever usually of short duration; the paroxysm being completed generally within twenty-four, and always within forty-eight hours; for if it continue longer, it becomes a fever of a different description."

The weed may be caused by the engorgement of milk in the breasts, the action of cold on these glands, the application of astringent washes, or by compression, or by injury done to those parts, taking cold, &c.

This complaint usually comes on soon after delivery, but may occur at any time during suckling.

It consists of a cold, hot, and sweating stage. It commences usually with severe shiverings resembling an ague chill, and is attended with severe pains in the breasts, small of the back, abdomen, &c. Women sometimes describe the uterine pains attending the complaint, as more painful than those occurring during labor.

After the fever, which is generally high, subsides, a copious perspiration follows, which usually produces relief from the most painful symptoms.

The breasts, in this complaint, become hard, swollen, and inflamed.

MANAGEMENT.—The treatment, whether commenced in the cold or hot stage, should consist of means that are calculated to produce prompt and free sweating. These means have been so frequently pointed out, that it is not necessary to refer to them here.

The application to the breast, recommended in inflammation of the breast, will be of service, and should be employed. Placing a steaming brick to the affected breast, and another to the bowels, will frequently relieve the severe pains which are experienced in this complaint.

If necessary a full course of medicine may be administered.

## CHAPTER VII.

## MANAGEMENT AND DISEASES OF CHILDREN.

We have already given directions for separating the child from the mother, and for the management of children that are still born, and need not notice these subjects again.

Before entering upon an examination of the subjects which we propose to embrace in the present chapter, we present to our readers the following GENERAL RULES, which are taken from the third volume of *Dr. Howard's* excellent work.

1. "When a child becomes fretful and feverish, or appears in any manner amiss either with fever, colic, costiveness, or looseness of the bowels, take half a teaspoonful or more of the diaphoretic powders (composition) and steep them in a half teacupful of hot water; then pour off, sweeten, and add cream enough to modify the strength of the medicine to suit the age of the child. Of this give at discretion, according to age, &c.; but in common, for a child of from one day to four weeks old, from one to three teaspoonfuls may be given once in from ten to sixty

minutes, according to the urgency of the symptoms, above this age the quantity may be increased at discretion, but much will depend upon the strength of the medicine, which, in all cases, should be sufficiently strong to impart a very sensible taste to the mouth. But one thing may be remembered—it will, in any reasonable quantity, do no harm.

2. “If the complaint be a little more severe, and especially if the bowels are in any way disordered, in addition to the medicine just recommended, injections made of catnip tea must be occasionally administered. In many instances one injection will be found sufficient to relieve the child of a severe cholic or other difficulty; but when it does not, or in any other case which cannot be immediately cured, the injections must be repeated at discretion. If the bowels be costive, a little butternut syrup may be added to the catnip injections; or if the syrup be not at hand, castor oil or any soft grease may be used in its stead.

“Catnip tea sweetened, and cream added, as recommended for the diaphoretic powders, will also be highly useful, taken into the stomach, especially for infants.

“In obstinate looseness of the bowels, or in dysentery, the injections must be made of a strong tea of the astringent tonic, bay berry, birth root, witch hazel, or some other astringent article; or any of those articles may be steeped in the catnip tea, adding to each injection from

a fourth to a half a teaspoonful, or even more, of the tincture of lobelia, and occasionally a teaspoonful or more of the diaphoretic tea, to make it more stimulating. In all bad or alarming attacks of either looseness of the bowels, or dysentery, injections must be frequently administered; and indeed they are highly useful in almost all cases of sickness of infants and children.

3. "In almost all complaints of children, especially after the first two or three months of their age, the *butternut syrup* is a highly useful medicine. Most diseases of children either consist in, or are connected with, a disordered state of the bowels, which this syrup, in conjunction with the diaphoretic powders and injections, will almost always remove in a short time.—We consider this article as one of the most valuable family medicines. It cleanses, by its purgative qualities, all irritating matter from the stomach and intestines, and by its tonic properties, strengthens and restores them to a healthy tone. It may be given either as a purgative, or in less quantities as a tonic, in all cases of bowel complaints. This syrup is a very valuable medicine for worms, a disease to which children are very liable. The quantity to be taken at a dose, must necessarily vary with the strength of the syrup, which is seldom prepared twice alike, and also with the age of the child. But of the strength which we usually prepare it, for a child two months old, a teaspoonful will

frequently be sufficient to operate as a purgative; but when given with this intention, if it does not produce the desired effect in from one to three hours, another dose must be given.—For a child one year old, from half to a whole tablespoonful may be given as a dose.

4. “When children become so seriously ill as to require an emetic, either the tincture or infusion of lobelia may be employed in doses of one-fourth of a teaspoonful for the youngest children, increasing the dose with the age of the child, repeated at discretion until ample vomiting is produced.

“In violent and dangerous attacks, such as croup, cramp, convulsions, or fits, the tincture of lobelia must be administered in larger doses; or for older children, the anti-spasmodic tincture may be used with a happy effect.

CLOTHING OF CHILDREN.—The design of clothing for children, is to protect them against the excessive action of the atmosphere, the effects of changes in temperature, and the influence of storms, &c.

To accomplish these objects it is evident that it ought to be adapted to the existing season of the year, and yet be so loosely applied as to permit a free motion of the limbs and muscles.

An error is frequently committed in leaving the extremities comparatively unprotected while the body is warmly clothed. The arms and lower limbs should always be as warmly clad as the body. “All children should wear draw-

ers under their clothes, adapted to their necessities; cotton in summer and flannel in winter."

Again, nothing can be more absurd and hurtful than the practice, heretofore prevailing, of applying bandages and rollers to the bodies of infants. This practice not only prevents the body from growing in a proper shape, but it also prevents that constant and varied muscular action to which infants incline, and which is essential to their vigor.

It should be remembered always, that a well formed chest is almost indispensibly necessary to the enjoyment of perfect health. If the space occupied by the lungs be contracted, preventing their proper development and expansion, general weakness, and finally consumption, follow as the consequences. Similar results, also, follow compression of other parts, by which other vital organs, as the heart, stomach, and liver, are oppressed and opposed in the performance of their proper offices. And yet but little regard is paid to these facts in the customs which regulate the dress of children.

**NURSING.**—Children should be put to the breast as soon after birth as may be convenient. Nothing else can be so well adapted to their first wants as the first milk of the mother. In general no other food is necessary, and none should be employed for the first few months of the child's life.

"Doubt ye the laws by nature's God ordained?  
Or that the callow young shall be sustained  
Upon the parent breast? Be those your schools  
Where nature triumphs, and where instinct rules."

The judgment of the mother should always be exerted, however, in reference to the amount which her child is permitted to suck, since children, if unrestrained, are apt to gorge themselves, and injure their stomachs. They should be accustomed to nurse but seldom through the night.

When the mother, from any cause, cannot nurse her offspring, and another healthy female who laid-in at nearly the same time cannot be found to perform that office for her, new milk, or milk and water, may constitute the food of the child. This it should be permitted to draw from a bottle, through a clean linnen rag, rolled up and fitted to the mouth of the bottle, or through an artificial nipple.

After from four to six months, children that nurse may be accustomed to the use of milk occasionally. By degrees light bread may be added, in small quantities, to the milk, and other light food employed from time to time, and the child thus gradually learn to live independently of its mother's milk.

It should be remembered that the health of the child while nursing, is in a great measure influenced by the mother's condition. In consequence of this fact, the medical treatment of a diseased child, must frequently be commenced by attentions to the mother. In some instances it may be necessary to wean the child, in consequence of the bad quality of the mother's milk.

**PURGING.**—"The practice of giving infants, as soon as born, butter and sugar mixed, salt and water, or purging medicines, has often proved detrimental by producing acidity in the bowels. If the infant after being completely dressed, is apparently quite easy, it should be laid down to sleep, without taking anything; and after a few hours it may be applied to the mother's breast, whose milk, at that period being laxative, answers the purpose of cleansing better than all the drugs in the apothecary's shop; and by putting the child early to the breast, especially the first time of sucking, the nipple will be formed, and the milk gradually brought on. Hence much pain, and its consequences, will be prevented."

The proper treatment for children who need anything to excite an action in their bowels, has been described already.

**CLEANLINESS.**—"The most scrupulous attention to cleanliness during the whole period of childhood, cannot be too strongly inculcated. For the first week or two the infant should be bathed, morning and evening, in tepid water, and afterwards in cold water. The whole body ought to be washed in the morning, and the lower half at night.

"In washing with cold water it is proper to begin with the head and finish as expeditiously as possible.

“The infant should be afterwards well dried, particularly at the bending of the extremities, and the whole body and limbs should be gently rubbed with dry soft flannel or linnen until a glow of warmth appears upon the skin. It is the manner of washing a child that secures it from suffering from the application of cold water. The more delicate and weakly an infant is born, the more will cold water strengthen it, if well applied, and besides its bracing qualities, it will, by cleanliness, prevent excoriations, and and keep off that troublesom ecomplaint termed the *scald head*.”

An equal amount of attention should be paid to the clothes and beds of children.

AIR, EXERCISE, &c.—Hardly anything is more essential to health, than pure air, and proper exercise. Healthy parents, wholesome food and proper clothing, are all important to healthy offspring; yet they will avail little when exercise is neglected. It is said that the rickets never appeared in Britain until manufactures began to flourish, and people left the country, and began to collect together in great towns to follow sedentary employments. It is among this class, whose families are crowded together in small rooms, and have but little opportunity to enjoy healthy exercise or pure air, that this disease chiefly prevails, and not only deforms, but destroys many of their offspring.

As intimated before, nothing should be allow-

ed to interfere with the natural desire of children for almost constant motion. By attention to this rule, many infants who seem slender and feeble, will acquire vigorous and healthy constitutions. But infants, unlike the young of other animals, are dependent, in the first months of their existence, upon others for exercise. Hence it becomes the duty of parents and nurses to assist them.

Children may be exercised in various ways. They may be drawn in small wagons, carried in the arms, &c. "Whatever be the mode of artificial exercise for infants, it should be frequent, moderate in character, and short in duration, and under such circumstances that its limbs may be free for whatever motion they may be inclined to make. All uncomfortable motions should be carefully avoided." The practice of rocking children violently in a cradle, or jolting them on the knee, cannot be too much condemned.

When children have acquired strength sufficient to sustain themselves in a sitting posture, they may be placed on the carpet, and be presented with a variety of playthings. These will not only interest their minds, but by becoming spread around on the floor, will encourage them to creep. Being thus left at liberty, they will soon learn to pull themselves up by chairs, and in proper time, by little attention, they will learn to walk.

Children of both sexes should be allowed ample time, in pleasant weather, for sport in the open air. They should not be confined too long in school, or kept in the sitting posture at home to commit lessons, but may be permitted to have their periods of study alternated with out-door sports.

Little danger exists of children taking cold by thus having liberty in the open air, especially where they are properly clothed, and washing with cold water is employed as we have directed. Children who are confined to the house, and treated with the greatest tenderness are the ones who are most liable to colds, and other disorders.

“A very bad custom prevails of making children sleep in small apartments, or crowding two or three beds into one chamber. When children are confined in small apartments, the air not only becomes unwholesome, but the heat relaxes their solids, renders them delicate, and exposes them to colds and other disorders.” Equally worthy of condemnation is the practice of putting children to bed, or in the cradle, with their clothes on, and covering them closely with blankets, by which they are made liable to take cold upon the first exposure.

WEANING.—“The obvious correspondence,” says Dr. Eberle, “which exists between the successive appearance of the teeth, and the development of the digestive powers, affords us a safe guide in relation to this subject.” The artificial

nourishment may be commenced with the appearance of the first teeth, and gradually increased in quality and quantity, till the incisor teeth have made their appearance, (seldom sooner than the eighth, or later than the twelfth month,) when the child being pretty healthy, it may be taken from the breast altogether; and its digestive organs will have acquired sufficient activity to digest what the system demands, viz: a more substantial nourishment than that of the breast."—*Curtis*.

"When the period of weaning is approaching, small portions of milk, thickened with bread, rice, or rice flour, chicken, mutton, or beef tea, &c., should be allowed the child two or three times a day, whilst at the same time, the intervals of suckling should be more and more prolonged."

It sometimes happens, that in consequence of the milk having acquired a hurtful quality, children should be early deprived of the breast. This is generally the case when the woman is subject to scrofula, and other diseases connected with impurities of the blood. The milk is generally bad in women who menstruate during lactation. When from these causes, or any other, the milk becomes vitiated, or when its constant drain affects the health of the woman, the child ought to be weaned at once.

Children should seldom be permitted to nurse after they are a year old.

**TONGUE TIE.**—"Sometimes there is a thin, wide membrane extending under the tongue of infants almost to the tip, so as to hold the tongue from projecting beyond the tops of the under teeth. This membrane should be carefully cut with a pair of blunt pointed scissors. Examine carefully and not cut so far as to take what ought to be left, in which there are arteries and veins, to sever which might produce dangerous hemorrhage, besides the mischiefs that would be done to the motions of the tongue, by cutting off the muscle that attaches it to the arch of the lower jaw bone."

**RETENTION OF THE MECONIUM.**—"The meconium is the dark green substance which composes the first discharge from the bowels of infants."

The first milk of the mother is generally sufficient to remove this. Should the child suffer any inconvenience, however, by its retention, an injection of sweetened water may be administered, or molasses and warm water, or a tea of elder blows, may be given as a purgative, and aided in its operation by the injections.

**RETENTION OF URINE.**—In some instances infants are troubled with retention of the urine. To relieve the difficulty, give a tea of pumpkin seeds, or some other diuretic, and apply cloths dipped in warm water to the bowels, or bathe the abdomen with warm lobelia tincture containing a small quantity of spirits of turpentine.

**COLIC AND GRIPING.**—Children are frequently troubled with these complaints, accompanied with a discharge of green stools.

To cure them, cordials containing a quantity of opium, are frequently used. This is a dangerous and hurtful practice, old school writers themselves being judges.

All that is necessary, is to follow the directions given for curing colic, in Dr. Howard's general rules, in ordinary cases. Should anything else be needed, lobelia tincture, enough to produce vomiting, may be used in connection with the injections. We have known it repeated every night when children were restless, and always with the effect to produce rest.

**VOMITING.**—"This is a vital operation and salutary in its tendency, but like all other *disturbed* actions, is an indication that something is wrong." When the child enjoys good health it generally arises from overloading the stomach, and should be cured by giving it less. If it is caused by improper food or other irritating substances, give an emetic of lobelia.

**APTILÆ, THRUSH, OR SORE MOUTH**—"Is an eruption of white spots, resembling little pieces of coagulated milk, generally appearing within the mouth, on the lips and inside of the mouth, and sometimes affecting the whole alimentary canal."

The cure consists in the use of lobelia emetics, injections, slippery elm tea, the vapor bath, astringent gargles, &c. If ulcers form, cayenne

or No. 6, may be added to the gargles, and when the stomach and bowels are affected with the apthæ, a portion of the fluid should be swallowed.

**ERUPTIONS OF THE SKIN.**—These are of various kinds but all require the same treatment, varying only according to the violence of the disease. It may consist of means to promote a determination to the surface, as the diaphoretic tea, or sassafras tea, injections, or if necessary an emetic. The vapor bath, also, may be used to cleanse the skin—or a wash of mild soap suds may be employed for this purpose.

**TEETHING.**—"The cutting of teeth, as it is familiarly called, although a natural function of the living healthy system, is nevertheless, often attended with severe suffering, and not unfrequently much danger. Some children, however, cut their teeth without much apparent difficulty, and need, of course, no particular attention

"The most common symptoms attendant upon difficult or painful teething are, pains and gripings of the bowels, with looseness attended by stools of various colors, such as green, pale, yellow, dark brown, or black. When teething is more difficult, there may be twitchings or mild spasms, startings during sleep; cough and difficulty of breathing; fever, and even convulsions.

"Children generally commence cutting their teeth at the age of six or seven months. The

common symptoms attending teething are, s'avering from the mouth; a disposition to thrust the fingers or other stustances into the mouth; and a swelling of the gums."

For irregularities of the bowels, the diaphoretic tea and injections should be employed as directed in the *general rules*. The butternut syrup, or magnesia, may be employed if a physic is necessary. The *neutralizing mixture* is almost an infallible remedy for looseness of the bowels.

If the gums swell considerably and the teeth do not come through readily, especially if the symptoms are troublesome, they should be cut. This is a very simple operation, causes but little pain, and generally affords immediate relief.

If convulsions occur, or other symptoms become very troublesome, emetics of lobelia, and the vapor bath should be employed according to circumstances. A tea of lady's slipper, should be employed in cases of spasm, or convulsion, in connection with the other means used.

GALLING AND EXCORIATION.—"Young children are very apt to become excoriated in particular parts of the body, particularly about the groins, and wrinkles of the neck, behind the ears, and under the arms, such places being kept much moistened by urine or sweat."

These complaints prove troublesome to children, and are in some measure owing to a want of cleanliness in the nurse.

“To prevent them, and likewise to remove them when they do occur, it will be necessary to wash the parts well with cold water once or twice a day, to change the linen often, and keep the child perfectly clean and sweet. After the child is washed and dried, the part affected may be sprinkled with a little fine chalk” [or starch.]

“When ulcers exist about the ears, if very bad, the child may be purged with the butter-nut syrup or magnesia, and the sores kept cleanly washed either with mild soap suds, or cold milk and water, and after each washing bathed with a tea of wild lettuce. We have seen remarkable cures performed by no other means than bathing with this tea.” A tea of sumach, or pond lilly, and golden seal, make a valuable wash for ulcers.

If there is much heat and inflammation, a poultice of slippery elm may be applied cold to the affected part. After the inflammation is subdued, the wash recommended above, should be employed until a cure is effected.

**HYDROCELE.**—“This is a collection of water in the scrotum of male children, resembling the same disease in adults. It is commonly discovered a few days after birth, the scrotum being swelled in a round uniform manner, though generally confined to one side only, and is of a half transparent appearance.” It may be cured by the application of cold water. Two quarts

may be poured on, morning and evening, from a coffee pot.

CHOLERA INFANTUM.—“Sudden and violent vomiting and purging, generally commencing nearly together, but rapidly exhausting the strength and extinguishing vitality.” The discharges from the bowels consist, at first, of a turbid frothy fluid mixed with small portions of green bile, or colorless water, and small floculi of mucus.

After the disease is fully established, the secretion of bile is entirely suspended. Sometimes the disease proves suddenly fatal.

TREATMENT.—Give lobelia in bayberry tea, until thorough vomiting is effected. This should be aided in its operation; by the use of the vapor bath, and other means to bring the determinations to the surface. Injections of bayberry, or some other astringent containing a quantity of cayenne or number six, should be used in connection with the other treatment.

After the vomiting is arrested, the *neutralizing mixture* may be given to act slightly on the bowels, and followed with a tea of bayberry or some other astringent. The powder of mandrake root combined with equal quantities of cream tartar and mint, constitutes an excellent physic for such cases. If the child is weak, and recovery seems lingering, some suitable tonic may be given.

JAUNDICE.—“This is apparently similar, in every respect, to the complaint bearing the

same name in adults. The skin is yellow, the eyes and urine also tinged with the same hue, whilst the stools are white or clay colored, and the bowels costive."

"There is however, a yellowness of the skin which is often seen in very young children, and which by many is called jaundice, but in reality is not this complaint; nor indeed can it, in general, be called a disease, as there is no other evidence of it than the color of the skin.— True jaundice may always be known by attending to the color of the eyes, urine, and stools."

MANAGEMENT.—This is rather an obstinate complaint, yet it may be overcome by persevering attention, in every case.

The treatment may be commenced by giving the preparation of mandrake root, cream tartar, and mint, in small doses, which should be continued in quantities sufficient to keep up a slight bilious discharge, for a few days. This may be followed by a tea of poplar bark and golden seal, or some similar preparation.

Lobelia emetics, also, should be employed in connection with the vapor bath, composition tea, &c.

This treatment should be continued, repeating the physic, and emetics, and baths, until a cure is effected.

RICKETS.—This is a disease of common occurrence among children who are improperly confined, who live in cold damp climates, who suf-

fer from inattention to cleanliness and want of food, &c.

This complaint is so commonly understood that a description of its symptoms is unnecessary.

*Management* — Commence by giving composition tea for a day or two, and then follow with a thorough emetic. Repeat the emetic every few days, and give daily injections of composition tea. Between the emetics use a tea of spice bitters, poplar bark, or some similar tonic, number six, will be valuable, taken internally, and applied to the surface.

In addition to the above, the cold shower bath may be administered every morning. At first, tepid water may be used, each time applying it cooler, until the coldest spring or well water is employed.

The best way to administer the bath is by pouring the water on in large quantities. We have ordered the child to be placed under the spout of a pump, and kept there for several minutes. Before applying the water, composition tea should be given to promote internal warmth, afterwards, the child should be wiped dry and wrapped in a warm blanket until fully recovered from the chill caused by the bath, when the stimulating liniment may be applied to the whole surface with considerable friction.

Children with the rickets should be warmly clad, especially the feet, and may be permitted to have proper exercise in the open air.

**CROUP.**—This is a highly dangerous inflammatory disease, affecting the mucus membrane of the trachea and larynx : and is characterized by difficult breathing, febrile symptoms, and a peculiar cough, said to resemble the barking of a young dog.

*Management.*—In commencing the treatment of this complaint, lobelia, in some of its forms, should be given until free and copious vomiting has been produced.

After the emetic has done operating, lobelia tincture and tincture of blood root combined, may be given every two hours, or oftener, to produce considerable nausea. This medicine may be pushed so far, in bad cases, as to cause vomiting several times a day.

The vapor bath is beneficial in this disease. So also is the use of composition tea and other means to favor sweating. The bowels should be evacuated occasionally by the use of laxatives, or stimulating injections. The emetic may be repeated according to circumstances.

**MEASLES.**—This complaint is not confined to children, although a large majority of persons have it while in childhood.

This disease is so well understood that we forbear giving a description in this place.

*Management.*—In all ordinary cases, all that is necessary is to give composition, or some other diaphoretic tea, for the purpose of keeping the determinations to the surface.

When the eruption does not readily come out, emetics of lobelia and the vapor bath should be employed according to circumstances. When the fever is high, the breathing difficult and the lungs appear to be threatened with inflammation, in addition to frequent emetics and the vapor bath, lobelia should be given in broken doses to excite almost constant nausea. The mustard plaster and hops steeped in vinegar should be applied over the lungs when they are affected.

The bowels should be moved by injections or laxatives. Purges are improper.

**SCARLET FEVER.**—This complaint, like the preceding one, is principally confined to children. Scarlet fever, like the measles, is also propagated by contagion, and derives its name from the appearance of the eruption or rash, which is of a scarlet color.

Scarlet fever is often accompanied with swelling of the neck and face, and ulcerations of the mouth and throat.

*Management.*—In the severe forms of scarlet fever emetics of lobelia and the vapor bath are indispensable. These may be repeated daily if necessary. The third preparation of lobelia is the best form in which it can be given. The vapor bath is indicated whenever the skin is dry and hot.

When the attack is severe and sudden, small doses of the *third preparation* may be given to keep up almost constant nausea, until the eruption comes out.

When there is a tendency to putrescency, or malignancy, the courses of medicine should be followed by the use of the following, or some similar preparation: bayberry, golden seal, sumach, and lady's slipper, equal parts—cayenne enough to make it quite stimulating. *Dose*—a teaspoonful, in warm water sweetened, every three hours. Number six, in teaspoonful doses is valuable in such cases.

If there is swelling of the neck, apply poultices of roasted onions with cayenne sprinkled over their surface, and bathe with the stimulating liniment.

For ulcerations of the mouth and throat, use gargles of golden seal, sumach, and cayenne—equal parts. In small children it will be necessary, in place of gargling the parts, to wash them with a swab made of soft linnen cloth attached to a stick.

Physic should not be given unless of the mildest character. Injections, however, should be employed freely. If the bowels are sore or cankered, they may be composed of slippery elm tea. This may also be used freely per stomach.

**INFANTILE ERYSIPELAS.**—This is a dangerous species of the erysipelatous inflammation. It usually attacks children within a few days after birth, and rarely later than the first month.

It usually commences on the toes or fingers, which look swelled and bluish, as if cold. Sometimes it begins at the belly, about the shoulders or neck, or on the inside of the thighs, and is

accompanied with fever. The swelling is not generally very great, but the skin becomes hard, turns purple or livid, and is liable to mortify.

*Treatment.*—The butternut syrup should be given in doses sufficient to keep the bowels constantly open. Emetics will undoubtedly prove beneficial in checking the inflammation, in the first stages of the disease. Chloride of soda is said to form a valuable local application. Others recommend the vegetable astringents.

**HOOPING COUGH.**—This is a convulsive cough propagated by contagion, and in its first stages generally accompanied with fever.

*Treatment.*—"In all severe cases of hooping cough, where there is difficulty of breathing, a full pulse, much heat and other febrile symptoms, a full course of medicine is indicated and should not be neglected. But in the milder forms of the disease, but little else is necessary than nauseating doses of the tincture of lobelia, combined with equal parts of tincture of blood root."

Frequent steamings cannot fail to be beneficial. The bowels should be kept open by gentle aperients or injections.

We have found benefit, in bad cases, from the application of a plaster, made by mixing Scotch snuff in an equal quantity of lard, over the throat.

Children who have this disorder should be warmly clad, in order to guard against the effect of sudden changes in the atmosphere.

CONVULSIONS —“Violent spasmodic affections sometimes attack infants without any apparent cause; but in general they are produced either by a lodgement of some acrid matter in the intestines, or wind pent up, or they arise from teething. worms, the sudden striking in of a rash, or the accession of some constitutional disease, as for example, the small pox, scarlatina, &c.”

*Management.*—There is no medicine known of equal power with lobelia in controlling fits of every variety. This should be given in doses sufficient to produce thorough vomiting, and may be followed with a tea of white root, or composition, containing an equal quantity of lady's slipper. The emetic may be frequently repeated, according to circumstances.

In all cases where there is any reason to suspect the existence of worms, the *anthelmintic oil* may be given until the bowels are cleansed.—The butternut syrup is good in such cases.

In severe cases the operation of the lobelia may be assisted by the use of the warm, or vapor bath.

WORMS.—Children are frequently troubled with worms in the stomach and bowels. The usual symptoms of worms are, disagreeable breath, squeamishness, vomiting, looseness of the bowels, griping, a hard tense and full belly, variable appetite, grinding of the teeth, picking of the nose, a dry cough, flushes of heat, a dull appearance of the eyes, a peculiar paleness of the countenance, &c.

*Cure.*—Thoroughly cleanse the stomach and bowels with emetics and injections—after which the anthelmintic oil, or some other vermifuge, may be given to carry off the worms.

*PROLAPSUS ANI.*—This is a falling down or protrusion of the lower portion of the bowels, and is generally met with in children of a weak habit, or those who have been subjected to severe purgings.

*Cure.*—Wash the protruding part with a strong decoction of some vegetable astringent, as oak bark, cranes bill, &c., after which it may be returned. Astringent injections should be continued for some time after the bowel is returned, and the general system may be braced up by the use of tonics, &c.

*MUMPS, SWELLED NECK, &c.*—“A course (of medicine) or two, and warm applications to the neck, on the first appearance of the symptoms of this form of disease, will disarm it of its terrors, and reduce it to a small affair. If any swelling occur, let it be fomented with steam from vinegar, and covered with relaxant poultices. Keep the patient comfortably warm, (though not excluded from fresh air) and the secernants and excernants free from obstructions. Let the treatment be moderate, but steady, and adapted to the current symptoms.”

*CHICKEN POX.*—“In this disease, an eruption much resembling that of a very favorable small pox, appears after a very slight fever. This

eruption soon proceeds to suppuration, in which state it remains but a little while before the disease terminates by the drying up of the pustules, which seldom leave scars behind."

*Cure.*—Little treatment is required in this complaint. If any becomes necessary, give composition or other warm teas, and open the bowels with the butternut syrup or injections.

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## CHAPTER VIII.

### ADMINISTRATION OF MEDICINE, HYGIENE, &C.

GENERAL PRINCIPLES.—All correct medical practice is based upon the following propositions:

1. That all living bodies possess a vital or living principle, which is designed to preserve the integrity of the organization, by superintending and sustaining all the healthy functions, as well as by furnishing resistance to the causes of disease.

2. "That all vital action is friendly to health and not to be opposed;" and that irregular vital action is the result of obstructions, or the causes of disease.

3. "That all disease is caused by obstructions of some kind to the full, free and universal operations of the living principle, and is itself, in essence, the incapacity or inability of some organ or organs to perform its or their duty."

4. "The obstructions to vitality are substances arrested in the capillaries, filling them up; contractions of those vessels by irritation; substances relaxing them by opposing the action of the proper nerves, and mechanical, or chemical lesions of the organs, as wounds, bruises, ulcers, corrosions, &c."

5. "That these causes of disease must be removed by supplying the living machine with those substances or medicaments, and aiding it by those processes, which it is pleased to make use of in the accomplishment of its object." In other words the intentions of nature are to be copied and assisted.

6. "That the intention of the system, in every effort to remove disease, is to remove the obstructions, generally; first, by relaxing itself, and, secondly, by stimulating the vessels to an unusual degree of action, and, thirdly, by restoring the organs to their original tone, texture, and equality of action, or by renewing their connexions where they have been separated."

CHOICE OF MEDICINES — If the foregoing principles be true—and we think they must be acknowledged correct—it follows that all agents, or processes, whose operations tend to reduce the vitality of the system, by producing a les-

sion of any part, or obstructing the smaller vessels, are not intended for the removal of disease, but become themselves the causes of disease. This conclusion, and we can form no other, must, if it have its proper influence, forever forbid the employment of the most popular remedies among physicians. The following are some of the objectionable features of the allopathic system of medicine.

*The use of Poisons.*—Poisons, says Hooper, are substances “which, when applied externally, or taken into the human body, *uniformly* affect such a derangement in the animal economy as to produce disease.” Others tell us that poisons “rapidly extinguish the vitality of the system.”

Poisons, therefore, we necessarily conclude, are unfit for medicines—their effects being directly the opposite of the condition which we aim to produce by the use of curative means. Disease we have seen consists in an obstruction or reduction of the vital energy. By what principle of philosophy then, can agents, whose actions produce obstruction and reduction of vitality, remove disease? Will increasing derangement produce harmony? Will health result from disease? or life from death?

True, many poisons are of a compound character, and possess properties in some degree medical, in connection with their deleterious principles. Thus calomel is cathartic, and cathartic medicines are needed in removing ob-

structions. But calomel possesses other properties which are dangerous, and that leave their consequences long after its purgative effect ceases. Shall we therefore use this agent, because, combined with its poisonous property, it possesses a medical power? Especially when we have thousands of other articles, equally valuable as a medicine, without any deleterious property?

There is another objection to the use of poisons, beside the effect which they leave in the system after their first operation ceases. It is this. Their deleterious influence is exerted in *opposition* to their curative power, if they possess any, and in harmony with the disease, which they are given to remove. The result is seen in the alarming fatality of acute diseases wherever the practice of administering poisons prevails.

The following affords an illustration of the dangerous effect of these agents. We were once acquainted with the progress of an epidemic, which prevailed through a somewhat limited section of country. At its first appearance it was considered as an inflammatory disease, and treated, accordingly, with calomel, and the usual routine of poisoning and depletion.—

The result was, nearly all died who received this treatment. Some families were nearly broken up, and the whole community was dressed in mourning. But what reference has this to the point before us? Does this prove that

the treatment had any thing to do with the mortality of the epidemic ! We will see. There are other facts which throw some light upon this question. There were some families in which the disease appeared, who, from witnessing the result of medical treatment, resolved to leave the cure entirely to the efforts of nature—aided by the use of warm teas, and other domestic medicines ; and out of those who dispensed with doctors—and there were a number of such—not one died. The result was, the doctors seeing the success of simple and harmless management, advised their patients to dispense with *active treatment*, as they called it, and rely upon such simple means as were within their reach, and the dreadful scourge, which the people thought had been sent upon them by a “*mysterious Providence*,” became disarmed of its terrors at once.

The proof is now conclusive, nature could successfully combat the power of the epidemic, but when the influence of poisons was added, the double foe was too strong for vital resistance. It may be proper to remark that a botanic physician from a neighboring town attended a number of patients with the same malady, not one of whom died.

We have already intimated that the effects of poisons remain after their first impressions subside. This is especially true in reference to the mineral poisons. Who does not know by observation, if not by experience, that the poi-

son of calomel exists in the human system for years after it has been taken ? How many unhappy beings are there, whose aching bones, affected by every atmospheric change, *feelingly* impress upon their minds a sense of existing obligations to the medical faculty. Indeed, there are few who recover from disease under regular treatment, whose systems do not exhibit marks of derangement not previously existing—while the constitutions of many receive a shock that renders future life a season of suffering and pain.

Poisons constitute the reliable medical agents of those who practice according to allopathic principles. If any doubt it, we refer them to Hooper's medical dictionary, where the most common medicines, such as the preparations of mereury, antimony, &c., are classed among the most active articles of this kind.

*Blood letting.*—This is not only unnecessary in all cases, but is likewise a source of much injury in popular practice.

This must appear evident upon a little reflection. Bleeding rapidly reduces the vital, or resisting power of the system. Can prostrating the vital energies, assist them in opposing the assaults of disease ? Or rather, does it not fortify disease in its lurking places, and render its triumph over life certain.

We can reach no other conclusion. If nature must be assisted, and if disease operates, in its fatal tendency, to produce a prostration of the

energies of nature, we cannot understand why bleeding does not aid disease, since its effects are precisely the same.

The contrast between the results of different modes of medical practice, affords a striking proof of the correctness of our conclusion. The botanic physician, being called to a patient, and finding the pulse full and strong and the fever high, reasons somewhat like this. "Here are evidences of powerful obstructions; but the reacting power of nature is strong, a good deal of vitality is exhibited, and a little *aid* from medicine will enable it to triumph over the disease." He considers the increased action, which is exhibited in his patient, as altogether favorable, and labors to assist it in throwing out obstructions. The result is, nearly all his patients with fever recover.

On the other hand, the allopathic doctor, seeing the symptoms above described, concludes there is too much vitality, too much resistance against disease—and he plunges in the lancet and drains off the vital fluid, until the excitement is measurably allayed. This he practices as often as reaction takes place, and flatters himself, that by subduing every effort which nature makes to resist the encroachments of its foe, he is promoting the recovery of his patient. The result, however, tells a different story—as is witnessed in the fatality of febrile diseases under such treatment.

We are fully established in the belief, that three-fourths, at least, of all who die with fever in the hands of popular physicians, might be saved by a proper application of such remedies as Providence has placed within our reach.—The lancet has destroyed more lives within the last two hundred year than the sword.

*Excessive Purging*—Is another evil in the hitherto prevailing systems of medical practice. That remedies designed to evacuate the bowels, and relieve them of morbid accumulations, are indicated, we hesitate not to declare. And we as unhesitatingly assert, that cathartics, pushed beyond the extent of mere evacuants of the contents of the bowels, are hurtful. It cannot be otherwise, since, beyond this, they result in producing a determination to the bowels, and a drain of fluids from that part, while they leave the surface obstructed, and the skin dry.

The following principles should govern us in the use of evacuating medicines. Let each organ do its own appropriate work, and no more. If the obstructions are lodged in the capillary vessels, open the pores and let the obstructing matter escape through these channels. If the lungs are oppressed by mucus, or other accumulations, give medicine to relieve them. If the liver, or kidneys, or bowels, are obstructed, use the appropriate means for their recovery. If the obstructions are general, (which is frequently the case,) open all the outlets—at least all that labor under the difficulty.

That this is the right view of the subject, appears to us self-evident. Suppose the pores closed and the skin obstructed, would it be reasonable to administer medicines to irritate the lungs, and by this means procure a determination to these organs, for the purpose of evacuating the obstructing matter which exists on the surface? Is it any more consistent to make the bowels the channel through which the labor of other organs shall be performed? None at all, excepting that the bowels can sustain such a task upon their energies with less injury than would result to the lungs.

These principles are not regarded in the practice of regular physicians. Active purging is practiced in nearly every form of disease; and the universal result is, obstinate costiveness, or some other chronic derangement of the bowels.

*The use of harsh and unnatural modes of cure*—Constitutes another objection to fashionable practice. We have not space to dwell upon particulars. We can only refer to them, and leave the reader's own knowledge of facts to supply the rest. Under this head we include blistering, the use of setons, issues, &c., as well as the unnecessary use of instruments in parturition, and of the knife in surgery.

Having thus noticed some objections to the prevailing systems of medical practice, we proceed to give a few directions for the use of some of those curative means which are recommended in this book.

**BATHS.**—These are simply designed for the application of water, or its vapor, to the skin, for the purpose of removing obstructions which may exist there, as well as to promote a healthy condition of that organ.

“Those who are acquainted with the functions of the skin, will acknowledge the importance of bathing. It is the seat of perspiration, both sensible and insensible, and is the principal channel through which the worn-out matter of the system makes its escape. It is estimated that two-thirds of all we eat or drink, pass out of the body by the skin, leaving only one-third to be discharged by the bowels, the lungs and the kidneys. How important is it, therefore, to preserve the skin in a healthy and vigorous state, for if it does not perform its functions properly, the matter which should be eliminated through the pores, is suffered to remain in the circulation, and is deposited in the different organs and tissues of the body, giving rise to fevers, inflammations, consumptions, and diseases of every name and character.”—MARRISON.

There are a variety of different baths in use. The following are the principal :

*Vapor bath.*—Taking all things together, this is the most useful form of bathing known. It may be employed in all languid states of the system, in all cold and obstructed conditions of the skin, and in all seasons of the year, with decided benefit.

The vapor bath has long been in use among the Russians, and other nations in the north of Europe. Writers inform us that the inhabitants of those regions are in the habit of using them very frequently, and that they accustom themselves to leave the bath entirely naked, and plunge into cold water, or roll themselves in snow—and that they never experience any injury from the change.

The vapor bath is used by many as a means of improving their beauty. Indeed we know of nothing else capable of imparting such an agreeable softness and transparency to the skin, or such a healthy glow to the complexion, as this.

No fears need be entertained in reference to any injury resulting from the use of this bath. The common apprehensions about taking cold, as well as all other crudities which have been afloat concerning it, are altogether without foundation. So far from its inducing a liability to colds, it is, when repeated at intervals, of a few days, one of the best means known to prevent them during the variable seasons of the year.

The vapor bath is of peculiar benefit to persons who are troubled with cutaneous diseases, or who are subject to restlessness, or other nervous derangements. In the latter case it should be administered at bed time, when it will seldom fail to procure a good night's rest.

*Mode of administration.*—There are various ways of administering the vapor bath. The fol-

lowing is a common and convenient one:—Place two strips of board, two or three inches wide, across the top of a large wash tub, in such a manner as to support a common splint bottom chair with the back feet over the edge of the tub. Within the tub is placed a wash basin or some other vessel, containing two or three quarts of boiling water. Having these things arranged the patient is seated on the chair, covered only with a blanket, which is pinned around the tub and chair in such a manner as to exclude all the air except from the face. As soon as the patient is seated, a heated brick, or stone, is placed in the basin of water, by opening the blanket a little at the bottom, and replaced by another whenever it becomes so cool as not to create a sufficient amount of vapor. The brick should not be thrown into the basin at once, but may be held in the tongs, and introduced gradually, by which means the temperature of the bath can be graduated to suit the feelings of the patient. It is usual for the patient to drink freely of composition or ginger tea, before applying the vapor.

Instead of the foregoing plan of applying the vapor some place the patient on a chair, with her feet in a bucket of water as warm as can be borne, and surrounded with a blanket as before. The basin of water for creating the vapor is placed under the chair, and the operation is conducted as in the preceding one.

There are various other modes of applying vapor in use among practitioners and others in different parts of the country. A very convenient arrangement consists of a small boiler, with a tin pipe or tube for the purpose of conducting the vapor. The boiler may be constructed in such a manner as to fit an opening in a stove, or into the mouth of a teakettle. The patient may be placed on a chair as before, and the vapor conducted under the blanket.

The *vapor box* is extensively employed throughout the United States, and is the best arrangement known for applying vapor.

This is a wooden box, about seven feet high, two and a half wide, and three in depth, and has a door in front, large enough to admit a person. The box is furnished with two bottoms a few inches apart, the upper one being perforated in such a manner as to permit the vapor, which is introduced between the floors, to be distributed into a large number of small streams as it enters the box. The box is also furnished with a seat, and has a small window or opening furnished with a curtain, which may be removed to admit the air if necessary, or through which the patient may inhale air, if the vapor feels oppressive. The vapor is conveyed to the box by means of the pipe before described. The top of the box is furnished with an apparatus for admitting the cold shower. This may consist of a small box or frame, having the bottom

pierced like a seive, and may be closely fitted to an opening in the cover of the vapor box.

The patient may be furnished with a basin of cold water while in the box, with which the head may be bathed if any oppression or disagreeable feelings are produced by the vapor.—Dashing cold water on the face or breast will give relief if the patient feels faint.

The length of time necessary to apply the vapor, must be determined by the condition of the patient, and the result to be accomplished. Generally fifteen or twenty minutes will suffice.

*Hip bath.*—This is simply the vapor bath applied to the lower part of the body, by confining the blanket around the waist. It is peculiarly serviceable in female obstructions, painful menstruation, &c. Its advantage arises from the fact that the vapor bath may be applied more directly to the region of the disease, and may be continued for a great length of time without producing faintness, or other disagreeable symptoms.\*

**COLD SHOWER BATH.**—This is simply the application of cold water in a shower, by means of some convenient apparatus, to the whole body. The morning is the most suitable time

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\* It should have been remarked while speaking of the vapor bath, that it is usual to make an application of cold water to the surface of the patient, just before leaving the bath and whilst at its highest temperature, by dashing on several quarts at once, or by washing it with a wet towel. In weakly persons the temperature of the water may be raised somewhat, to prevent the shock being too severe. No injury will result from this application—but it will prevent taking cold.

time for its use. Persons unaccustomed to it, may begin with a tepid bath, and employ it cooler each time, until the coldest water may be used. After the application of the shower, the whole body should be briskly rubbed with a coarse towel, until a complete glow is produced over the whole surface. If any chill remains, the individual may throw back the shoulders, and expand the chest as much as possible, and in this position walk the room briskly for a few minutes, until the chilly sensation is relieved.

**SPONGE BATH.**—This is the application of cold water to the surface by means of a sponge. Its use is designed to serve the same purposes as the foregoing.

**ALKALINE BATH, OR WASH.**—This has been frequently referred to in the foregoing pages. To prepare it dissolve a tablespoonful of salærated in a quart of warm water.

**SALINE BATH OR WASH.**—This is prepared by dissolving a tablespoonful or more of salt in a quart of water. It may be used warm or cold, according to circumstances.

**WARM BATH.**—This is a convenient bath, especially for children, and may be employed when it would be difficult to administer the vapor bath. The only apparatus necessary, is a large tub two-thirds full of warm water in which the child may be placed, and covered over with a blanket, excepting its head. The water may be as warm as it can be comfortably borne.

**STEAMING BRICKS.**—These have been referred to very frequently in the preceding pages. To prepare a steaming brick, place it in the fire until of a red heat. It may then be placed in a vessel of water until nearly done hissing, when it may be wrapped in a wet cloth, and surrounded by one which is dry. These may be placed to the feet and sides of persons, who are unable to sit up for the purpose of being vaporized.

**EMETICS.**—These are substances which evacuate the stomach by vomiting, and are among the most important of our medical agents.

The importance of emetics may be understood, when we remember that the stomach is the great center of sympathies—that disease, wherever located, cannot fail to affect this organ, and that effects produced upon it, are, in a similar manner, transmitted to other organs.

There is another important advantage derived from the use of emetics of lobelia. Lobelia is a powerful relaxant, and this effect always precedes and accompanies the act of vomiting. The relaxation thus produced assists the mechanical action of vomiting in distributing the circulation equally through every part. This is one of the most important results to be accomplished in the administration of medicine. Hence the almost universal applicability of this agent. And hence the astonishing results that are witnessed in its use.

*Directions for giving an emetic.*—When an emetic is given without the vapor bath, the pa-

tient should be prepared for its operation, by lying in bed, and drinking freely of composition, or some other warm tea, until perspiration is produced. The operation of the teas may be assisted by placing a steaming brick to the feet.

The emetic is prepared in various ways. The following are examples. Take of the pulverized leaves of lobelia, five teaspoonsful, or of the pulverized seeds three teaspoonsful, cayenne half a teaspoonful, lady's slipper and bayberry a teaspoonful each, add a teacupful of boiling water, let it stand fifteen minutes. The infusion may then be strained off and divided into five or six doses, one of which may be given every ten or fifteen minutes, until a sufficient amount of vomiting is effected. Some persons may not require as large a quantity of the emetic as above, and others may require more.

Another method is as follows: Put three or four teaspoonsful of the pulverized seeds into a teacup, and pour on boiling water enough to make four or five doses of two teaspoonsful each. One of these doses may be taken in a teacup, half full of bayberry tea every ten or fifteen minutes until the patient vomits sufficiently.

Some administer the emetic in substance. The dose is a half teaspoonful of the finely pulverized seeds, or somewhat more of the leaves, which may be repeated every fifteen minutes until a proper effect is produced.

If the emetic produces considerable nausea, without the patient being able to vomit, give salutaratus water, which will correct the acidity of the stomach, and assist the operation of the emetic.

The patient may drink freely of gruel, or warm teas while vomiting. These will make the operation of the emetic more easy than if the stomach is allowed to become emptied.

After the emetic, the patient may be washed off with the alkaline wash, and take such nourishment as is suitable to his condition.

**INJECTIONS.**—These are fluids to be thrown into the bowels, by means of a syringe. They are prepared of various articles, and are designed for various purposes. A very good injection to be administered during a course of medicine, may be prepared by steeping a teaspoonful of composition, and half a teaspoonful of lobelia, in two-thirds of a teacupful of boiling water. This should be strained and administered blood warm.

**COURSE OF MEDICINE.**—This has been so frequently referred to, that a description becomes necessary. It consists in the administration of injections to cleanse the bowels—of an emetic, and of the vapor bath before and after taking the emetic.

It is usual to commence by giving a stimulating injection, which is immediately followed by the vapor bath, the patient drinking freely of

bayberry or composition tea before, and while in the bath. After free sweating is effected, the patient may take the first dose of the emetic, while in the bath, and immediately get into bed. A jug of warm water, or a steaming brick, may be placed to his feet, and the remainder of the emetic given as before directed.

When the emetic is done operating, it is usual to let the patient rest, and sleep if so inclined, an hour or two, after which another injection is administered, and followed by the vapor bath as before. Before leaving the bath the patient may receive the cold shower, or may be washed off with a cool alkaline wash, and the surface may be wiped dry with a coarse cloth.

**MODIFIED COURSE.**—The complete course of medicine fulfils more indications, and accomplishes greater results in the treatment of disease, than any other process ever known. It is applicable in all diseases, and under nearly all circumstances. Sometimes, however, it is inconvenient, or unnecessary to administer a full course, hence it is frequently modified to conform to circumstances.

Sometimes the latter vapor bath is omitted, and sometimes one or both of the injections. In many cases the emetic, administered as before directed, will perform all we wish to accomplish by the course.

## HEALTH, BEAUTY, &amp;C.

We had intended to devote a long chapter to the discussion of some general principles connected with the preservation of female health and beauty. We have, however, already occupied the space which we design for that purpose, and can only give a few hints, in addition to what has been said already. These for the sake of brevity, we will arrange under a few general heads.

PHYSICAL SYMMETRY.—Symmetry of form is essential to both health and beauty. The human frame unperturbed, is the most perfect specimen of symmetry found in the Creator's works. While it retains its original perfection in this respect, the essential organs of the body are afforded proper space, and sustain such relations to each other, that, separately and combined, they perform their appropriate functions. The result is, so far as physical conditions are concerned, health and beauty in their highest perfection are promoted.

Deviations from this standard may be prevented in children, by allowing them exercise, and by attentions to their dress and habits, as before noticed. but can these deviations be corrected after they exist in persons who have arrived at maturity ? We answer, in many instances they can.

Before fully answering this question, however, we will notice some of those deformities which most commonly exist. These relate chiefly to the neck, shoulders, chest, and waist.

The proper position of the neck is in a line perpendicular to the spine of the back. If it is bent in either direction, especially forward, it injures the voice and interrupts the perfect operation of breathing.

The proper position of the shoulders is seen, when they are thrown back in such a manner as to have the shoulder blades lay perfectly flat against the ribs beside the spine. The edges should not turn up at all. When the shoulders are brought forward habitually, the weight of the arms and shoulders hang upon the chest, which becomes contracted, thus laying the foundation for weak lungs, or consumption.

The chest should be round, large, and erect. This is not only an important ingredient in a beautiful form, but is absolutely essential to good health. A narrow, flat, or sunken chest, prevents the proper expansion of the lungs, without which health cannot exist.

Deformity of the waist is principally caused by the foolish habit of tight lacing, and is to be remedied, in some measure, by leaving off the absurd practice, which causes it.

These deformities, we now remark in answer to the previous question, are all the result of faulty habits, and are to be corrected by changing them. Let the head and neck be carried

erect, the shoulders thrown back, the chest expanded, and the waist left unconfined, and the evils of which we speak may be in a great measure overcome.

Patience and perseverance will be necessary, however, to accomplish any good. The attitudes must be carefully watched, a stooping posture must be avoided in sitting, standing, or walking, and the lungs must be entirely filled in the act of breathing. These changes may be somewhat unpleasant at first, but in the end will become the most agreeable.

Shoulder braces were invented to remedy the deformity of the shoulder before described. They are so constructed as to bring the shoulders downwards and backwards, while at the same time they furnish support to the whole spine. These may be worn in all cases when the shoulders and chest are deformed as before noticed.

Before leaving this subject, we would recommend each one of our readers to procure a copy of *Dr. Fitch's* book, entitled "*Six Lectures on the Uses of the Lungs*," &c. It is a valuable book and will richly repay the cost of obtaining it. It may be found at most of the book stores in the country.

**SYMMETRY OF THE MIND.**—By this meant a permanent condition of the mind, in which the passions are all properly balanced, none acting in excess, and no one acting at the expense of the others. A tranquil and contented state of mind

is essential to health, beauty, and long life. "Never allow remorse, revenge, envy hatred, or malice to take possession of your minds. These conditions of the mind deepen all the lines of the face, sharpen all the features, and give to their possessor the appearance of premature age, and call down upon her, who should and could be the delight of all eyes, the epithet of "hag." But, on the other hand, internal purity, and the practice of benevolence, the exercise of generosity, of kindness to all, "thinking no evil," practicing no evil, cultivating the fullest cheerfulness, will soothe and soften the coarsest brow. Above all, the whole mind requires an anchor that shall stay it in all the storms, vicissitudes, and troubles of life. This anchor is obtained in pure and undefiled religion—a constant reliance, in all trials, upon God our Savior. Practice judiciously, the precepts of health I have taught you, for your bodies. For your minds "never be wise above what is written," but learn and practice all the teachings of our blessed Savior, and your persons will be full of strength and beauty, your days will be filled with joyous health, and your lives be long, prosperous and happy."—FITCH.

**ATTENTIONS TO THE SKIN.**—Cleanliness sustains an intimate relation to a state of health. To promote this, therefore, should be one of our first considerations. The whole body should be washed daily with cold water. Those who have not tried the practice, would be astonished at the

change which it would produce in their feelings. The shower bath before recommended, will, in general, suffice for the ablution.

ATTENTION TO THE CONDITION OF THE BOWELS, &c.—When the bowels are costive, the fluids that should be discharged that way are thrown upon other organs, by which means extensive derangement are effected. The effects are seen in the thick, sallow, and unhealthy appearance of the skin, loss of brilliancy in the eye, headache, offensive breath, &c. The best remedy for costiveness is habit. No day should be allowed to pass, without an evacuation from the bowels. “Observe one particular exact time for it, and at that exact period solicit the evacuation. A few days, or weeks, patient solicitation, will usually restore nature to its full health in this respect.” Should this not succeed alone, aid it by eating bread made of unbolted flour, or corn meal. Injections may be used if these means are insufficient. Physicks generally increase the difficulty.

- The retention of the urine beyond its natural period, when habitual, is the origin of many unpleasant consequences. It produces a sallowness of the complexion, loss of flesh, a bad odor of the person, gravel, &c. The calls of nature in this respect, should always be attended to.

FEMALE DERANGEMENTS.—These have been noticed before. The subject is introduced here, only for the purpose of remarking, that a heal-

thy condition of the sexual organs is essential to beauty. There cannot be any extensive derangement of the menses, or disease of these organs, without making an unfavorable impression upon the complexion, and otherwise injuring the beauty of the countenance.

ATTENTIONS TO THE TEETH.—This is a subject of more consequence, than might appear at first view. Clean and healthy teeth are one of the most essential elements in female beauty. This is not all. Healthy teeth are essential to health. Many cases of dyspepsia arise from decayed teeth. They should be daily washed with a brush, and if any are decayed they should be extracted or filled. Acids are hurtful to the teeth, and should not be used to cleanse them.

FEET.—Cold feet should be avoided. In a state of health the blood is properly distributed to every part. This cannot be the case when the feet are cold. Habitual coldness of the feet, necessarily deranges the general health. To correct this condition then, bathe them frequently in water as hot as can be borne. If there are any spots of hardened skin upon them, scrape them off, and make the skin covering the feet as thin as possible. Ashes, added to the water, will increase the efficacy of the bath. After the bath, the feet should be wiped dry, and briskly rubbed with a coarse cloth. Wrapping them with a strong ligament, made by steep-

ing cayenne in vinegar, will assist in establishing the circulation in these parts.

**EXERCISE AND AIR.**—One of the most common evils to which the customs of society in this country subject females, is confinement to indoor and sedentary pursuits. Without exercise and healthy air, the best constitutions will soon fail. Yet how many females deprive themselves of these essential elements of a proper attention to health. Exercise should be taken daily, and in the open air. This should be continued through every season of the year. It will not do to exercise during the summer and autumn, and then remain within-doors through the long winter season, as most females do.

The human frame should be inured to all seasons, and trained to resist the influence of every change—and this can only be accomplished by habitual exercise in the open air. Walk in the open air should be practiced every day, when the weather will permit. When the weather is too inclement to allow this, exercise in large rooms, or on an open porch. Riding on horseback, or in an open carriage, furnishes an excellent mode of exercise for feeble persons. There are many other ways of taking exercise, which our space will not permit a description of. The following rules should govern in our attentions to this subject. Employ the morning for exercise when possible. The walk should be conducted through scenes calculated to interest the mind, and protracted until some

degree of fatigue is produced. All exercise should have a tendency to expand the chest, and favor a full inspiration of air. While walking or riding, therefore, throw back the shoulders, and carry the head erect. All exercise should be so conducted as to furnish an agreeable interest to the mind. If it be undertaken as a mere task, without affording any amusement, it will accomplish little good. These directions are necessarily limited, still they may furnish some useful hints upon which the good sense of our readers may make such improvement as particular circumstances require.

**DRESS.**—Little need be said upon this subject in addition to what has been remarked before, especially since this subject has been so frequently presented before the minds of all classes in community, that it is beginning to be tolerably well understood. Still many evils are connected with our habits of dress. The principal are, wearing too much clothing, wearing it too tight, and wearing it improperly distributed.—Too much clothing debilitates the system, and renders it sensible to the least change. We know of no better rule by which to be guided in reference to the amount of clothing necessary, than that given by Dr. Fitch. Use as little clothing as possible. Never wear clothing for health but for comfort. Many persons have ruined their health, by overloading their bodies with excessive clothing, with a view to its preservation. In reference to the second evil above

named, we will only remark that our dress should be so adjusted, always, as to permit the air to come in contact with the whole body.— This is necessary to carry off the vapor that constantly exhales from the skin, which would otherwise collect on the surface, and occasion obstruction and debility. The dress must, consequently, be worn loose, and permitted to hang lightly on every part. But a proper distribution of clothing is necessary to meet the wants of the body. This subject has hitherto been neglected by females in this country. The practice has been to envelop the body in a large amount of clothing, while the extremities are left comparatively unprotected. This is wrong. The extremities need the largest amount of attention. Let them, then, even the feet, be warmly clad, and one of the common causes of female derangement, will be removed.

**DIEET.**—This subject, also, has excited considerable attention, for several years past, and many evils have been charged upon our habits in this respect, which belong to other causes. Still there are errors in our dietetic habits. The only advice we can give on this subject, at present, is, —avoid hot tea and coffee, drink cold water, use such food as experience has demonstrated to agree with you, avoid excess, and take your meals at regular hours.

**SLEEPING.**—Sleep is designed to afford rest to those organs whose constant action must necessarily exhaust the system. Still, when exoes-

sive, itself becomes the cause of exhaustion and debility. Sleep, to accomplish its intended purpose, should always be taken in the early part of the night. Avoid late hours, and rise early in the morning. Most old persons have been early risers. Some attention to the kind of beds on which we sleep, as well as to the amount of clothing used while sleeping, becomes necessary also. The best rule is, let the bed be hard, the amount of covering as small as consistent with comfort, and use only a small pillow under the head.

MEDICINES.—Medicines are designed for a state of disease, and are not to be used while in health. They are also designed to aid, not supercede, the efforts of nature. Therefore never use them while in a state of health. Neither should we employ them upon trifling occasions. Better train nature to defend itself by the use of proper diet, exercise, bathing, cleanliness, &c. When medicines become necessary, use such as are known to be harmless. By all means avoid, as you would the pestilence, the use of mercury, antimony, arsenic, opium, and all of the most common medicines of popular physicians. They have been an unmitigated curse to the human family, doing more to abbreviate human existence, than all other causes now existing. In the language of one of the most distinguished physicians\* of the old school, who ever lived, "they have already de-

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\*John Mason Good.

stroyed more lives than famine, war, and pestilence combined." We will even go farther than this, and advise you to do as many others have done, avoid those who use such poisons under the foolish pretence of giving medicine. Study the treatment recommended in this book, and if you are sick, and cannot find a physician too conscientious to poison you, why then cure yourself. I can assure you that a little attention will qualify you to treat yourselves with more success, and greater safety, than the most scientific and popular physicians of the allopathic school, that can be found.

## CHAPTER IX.

## MEDICINAL PLANTS, AND COMPOUNDS.

Our descriptions under this head must, necessarily, be very brief, yet sufficient, we trust, to enable our readers, by the help of other means of information within their reach, to administer to their own relief in all ordinary cases of disease. For the convenience of reference, we have adopted a plan of classification for simple raticles, in which they are arranged according to their most prominent properties. By attention to this arrangement, persons afflicted with disease may be enabled to select a variety of medicines to meet any indications which may exist. If any medicines are mentioned with which our readers are not acquainted, or which they cannot procure, we advise them to consult any Botanic Physician, for such information as they may need.

## STIMULANTS.

Stimulants are among the most important medicines found in the materia medica. They are defined to be medicines which exert an exciting and invigorating effect upon the nervous and vascular systems, without

giving rise to any particular evacuation, either from the bowels, skin, or any other organs. In other words, they are medicines which stimulate and assist the vital powers.

Stimulants are useful in all cases of debility, in low fevers, cholera, diarrhœas, &c. They also assist the operation of other medicines when given in conjunction with them.

### CAPSICUM—(*Cayenne Pepper*.)

Cayenne pepper is composed of the pods of one or more of the different species of capsicum, reduced to apowder.

Capsicum is one of the most powerful and permanent stimulants known. It is at the same time devoid of any narcotic or dangerous property, will not excite fever or inflammation, as its enemies assert, and is consequently admissible in almost any form of disease.

*Useful* in dyspepia or weak digestion, choleras, debility, palsy, diarrhœa, costiveness, bleeding from the lungs, or hemorrhages of any kind, &c. It is also useful as a gargle in the sore throat of scarlet fever, and as an essential ingredient in liniments.

*Dose*, from a half to a whole teaspoonful, taken in substance, or made into tea. If it cause pain in the stomach it may be taken in milk.

### ZINGIBER, (*Ginger*,) *The Root*.

Grows in the East and West Indies. Ginger is an agreeable aromatic stimulant, and is an excellent substitute for cayenne pepper, especially when given to children.

*Useful*—in colds, flatulency, colic, coughs, debility, cholera infantum, &c.

**XANTHOXYLUM FRAXINEUM,** (*Prickly Ash, Tooth-ache Tree,*) *The Berries and Bark.*

Prickly ash is a valuable stimulant, diaphoretic, and the seeds, tonic and laxative.

*Useful*—in flatulency, colic, rheumatism, cold feet and hands, cramps, indigestion, &c.

*Dose*—of the powdered bark from one to two teaspoonfuls in substance, or twice as much made into tea. Of the berries, a teaspoonful in the form of tea.

**ASARUM CANADENSE.**—(*Wild Ginger, Coltsfoot, Canada Snakeroot, &c.*)—*The Root.*

Grows throughout the country, in shady places, in low grounds, and on the north side of hills.

Wild ginger is an aromatic stimulant, diaphoretic, emmenagogue, and nervine.

*Useful.*—In uterine obstructions, colds, coughs, pains in the stomach and bowels, &c.

*Dose.*—A teaspoonful of the powdered root in warm water sweetened, and repeated according to circumstances. It should always be taken in substance. Large doses will sometimes produce vomiting.

#### GUM MYRRH.

Gum Myrrh is the concrete juice of a small tree growing in Arabia and Abyssinia, which exudes spontaneously, and collects in masses on the bark.

Myrrh is stimulant, tonic, diaphoretic, anti-septic, and emmenagogue.

*Useful*—in female derangements, indigestion, palsy, debility, dysentery, cholera, &c. Injected into deep wounds, or applied to offensive sores, it speedily promotes the healing process. It also forms an excellent wash for spongy gums, and the canker-mouth of children. It is used in the form of a tincture.

*Dose*—a table spoonfull.

#### MINT.

Both peppermint and spearmint abound in all parts of the country.

Mint is an agreeable aromatic stimulant, carminative, and diaphoretic.

*Useful*—in relieving pains in the stomach and bowels, allaying nausea, expelling wind in preventing the griping effects of cathartics, and to cover up the disagreeable taste of medicines. The spearmint is a valuable medicine in diseases of the urinary organs, proving a good diuretic in such cases.

Wild Marjorum, Dittany, Cinnamon, and Cloves, are all valuable aromatic stimulants, and are useful in colics, cramps, flatulency, dysentery, &c.

The oils, however, are most frequently used as ingredients in liniments.

#### TONICS,

These are substances which tone up and invigorate the system, and assist digestion, without increasing the circulation,

CORNUS FLORIDA (*Dogwood, Boxwood*)—*The bark of the Root.*

A small tree abounding throughout the United States, attaining the height of from 20 to 30 feet. This is a powerful tonic, anti-septic, somewhat astringent, and when fresh, laxative.

*Useful*—in all cases of debility, prolapsus uteri, dyspepsia, whites, intermittent fever, dysentery, &c.

*Dose*—from a half to a whole teaspoonfull of the powdered root, and from a tea to a table spoonfull of the tincture, repeated as often as the case may require.

HYDRASTIS CANADENSIS (*Golden Seal, Yellow puccoon, Gall-of-the-earth.*) *The Root.*

Golden seal is found throughout the United States, but most abundantly in the west. It is a valuable bitter tonic, and slightly stimulant.

*Useful*—in all cases of debility, dyspepsia, dysentery, and is a valuable article in sore mouth and eyes, in which cases it should be used in decoction.

*Dose*—a teaspoonful of the powdered root.

HELOPSIS DIOICA (*Unicorn, Blazing star, Star root,*)  
*The Root.*

Found in abundance throughout the western states in almost every variety of soil. The root of this plant is tonic, expectorant and nervine.

*Useful*—in all cases of uterine debility, and is an excellent article to prevent abortion. It is highly re-

commended for colic, strangury, hysterics, rheumatism, jaundice, coughs, and consumptions.

*Dose*—from a half to a whole teaspoonful, in substance.

BERBERIS CANADENSIS (*Barberry*) *The bark of the Root.*

This shrub is chiefly found in the northern and eastern states. The bark of the root is a good tonic, laxative, and slightly astringent.

*Useful*—in jaundice, dyspepsia, but particularly serviceable in flux and dysentery.

*Dose*—a teaspoonful of the powdered root in substance, or twice as much in decoction.

CHELONA GLABRA (*Balmory, Snakehead, Turtlehead, Turtlebloom*) *The Leaves and Blossoms.*

This plant is found throughout the United States, along the borders of small streams, and wet places. Balmory is intensely bitter, and a most valuable tonic, laxative, anthelmintic, and when taken in large doses, proves cathartic.

*Useful*—in all cases of debility, impaired digestion or depraved appetite. It is likewise recommended in eruptive diseases, boils, sores, and piles.

*Dose*—a teaspoonful of the plant in substance, or a tablespoonful in infusion. In case of worms, an ounce of the herb in decoction should be given, and followed by a cathartic.

*Yellow Poplar, Quaking Asp, Gentian, Centaury, Columbo, Virginia-Snakeroot, and Bitter-Ash, are all*

valuable tonics, and may be used as substitutes for any of the foregoing articles.

ASTRINGENTS.

Astringents are substances that contract or condense and support the tissues of the body. When taken into the mouth, they produce a sensation of roughness, or puckering of the lips, tongue and palate.

GERANIUM MACULATUM (*Cranesbill, Crowfoot*) *The Root.*

Cranesbill is a small plant, generally growing from six inches to a foot in height, and is found in all the states.

Cranesbill is a pure and powerful astringent, and styptic, and is free from any unpleasant taste or smell.

*Useful*—in prolapsus uteri, fluor albus, profuse menstruation, diarrhœa and dysentery. It is valuable in sore mouth, and proves beneficial as a wash for sores of long standing, piles, cancers, &c.

*Dose*—from half to a whole teaspoonful in substance, or twice as much in decoction.

MYRICA CERIFERA (*Bayberry, Wax-myrtle,*) *The bark of the Root.*

Bayberry is a shrub, from three to four feet high, growing along the coast from Maine to Georgia.

Bayberry is one of the most valuable articles of this class that we possess. It is astringent, tonic, stimulant, diaphoretic and anti-septic.

*Useful*—in dysentery, cholera morbus, fluor albus, difficult or profuse menstruation, and is excellent to facilitate labor. It is likewise beneficially employed in dyspepsia, and in removing canker from the mouth, stomach, and bowels.

*Dose*—a teaspoonful of the powder, or double the quantity in infusion.

*NYMPHA ODORATA (White Pond Lilly) The Root.*

White Pond lilly is found in most of the states, growing in wet ponds, and marshy grounds, and is well known. The root of this plant is a pure and powerful astringent, with but little taste or smell.

*Useful*—in prolapsus, leucorrhœa, dysentery, flux, diarrhœa, canker, scarlet fever, &c.

*Dose*—from a half to a teaspoonful, or twice as much in infusion.

*TRILLIUM LATIFOLIUM (Beth root, Jewsheep,) The Root.*

Beth root is found in most of the states, delighting in damp woods, on the north side of hills, and in rich soil.

This is a most valuable article, and is second to none of this class. It is astringent, styptic, antiseptic, expectorant, and tonic.

*Useful*—in whites, prolapsus uteri, asthma, catarrh, cough, dysentery, diarrhœa, flooding, profuse menstruation, &c.

*Dose*—from a half to a teaspoonful in substance. An infusion or decoction is almost inert, and should never be used.

**RUBUS STRIGOSUS**—*Red Raspberry*—*The leaves.*

The red raspberry is a mild and agreeable astringent.

*Useful*—in the treatment of bowel complaints of children, in which case it should be given in decoction by mouth and injection; but this article is especially valued for the direct tendency it has to the uterus. When used freely during parturition, in conjunction with cayenne, it never fails in allaying false, or promoting true labor pains.

*Sumach, Witchhazel, Whiteoak bark. The leaves of Hemlock, and Alum root,* are all valuable astringents, and may be used whenever this class of remedies is indicated,

**EMETICS.**

These are substances, as before noticed, which have a specific action on the stomach, producing alternate contractions and relaxations of the muscles of this organ, by which means its contents are ejected.

**LOBELIA INFLATA** (*Indian Tobacco, Emetic Herb, Eyebright, &c.*) *Pods and leaves, and seeds.*

This plant is found in nearly every part of this country, and is too well known to need any description.

Lobelia is the best and safest emetic known. In addition to this it is diaphoretic, expectorant, relaxant, and anti-spasmodic. All of these properties are prom-

inently exhibited in the operation of this most valuable medicine. As an anti-spasmodic, it is wholly unrivalled by anything in the entire range of the *materia medica*.

*Useful*—In fevers, inflammations, fits, cramps, convulsions, coughs, asthma, croup, and every variety of disease where either a relaxant or emetic is needed.

No article in use among medical reformers has excited so much opposition on the part of those who advocate the mineral poisoning system, as this. Interested persons have been industriously engaged in circulating false reports about its dangerous effects—the medical faculty have exerted against it the weight of their entire influence—and a considerable portion of community, with only intellect enough to believe what the *doctor* says, and swallow what he gives asking no questions, has joined in the crusade against the proscribed article and those who employ it—exceeding their masters, if possible, in the work of falsehood and persecution. Still, amid an opposition stronger than was ever encountered by any cause, Christianity excepted, it has won its way into favor among the thinking unprejudiced portion of community, and established a reputation that can never be overthrown.

In its favor we may present the testimony of all the botanic physicians in the country—many of whom were once eminent in the ranks of alloapathy—who prescribed it daily with unparallelled success—the testimony of thousands who have been saved by its use after being given over by their physicians to die, and the testimony of entire communities, who use it indiscriminately as a family medicine, with no bad effect, save to render the services of the physician seldom necessary.

*Dose.*—Of the pulverized seeds, half a teaspoonful repeated every ten or fifteen minutes until thorough vomiting is effected. Of the pulverized pods and leaves somewhat more is required. When an infusion is used, a larger quantity of the lobelia is necessary than when it is taken in substance.

Should any symptoms arise during the operation of lobelia that appear alarming, as restlessness tossing about, sighing, extreme relaxation, convulsive breathing, rolling of the eyes in their sockets, paleness of the countenance, coldness of the extremities and skin, mental derangement, &c., no fears need be indulged in, as such symptoms, though seldom occurring, only indicate the favorable influence of the medicine over existing disease. Universal experience in the use of this article, has demonstrated that there is nothing really alarming in the occurrence of these symptoms, since, if the patient be left alone entirely, a safe and certain reaction takes place, generally resulting in the complete removal of disease. We may, however, facilitate the reaction by giving freely of cayenne tea, combined with astringents and nervines. To prevent their taking place, keep the patient in a free perspiration while the emetic is operating.

VERBENA HASTATA (*Blue Vervain*)—*the herb.*

This plant is found generally throughout the States, growing by road sides and in dry fields.

Blue Vervain is emetic, diaphoretic, &c.

*Useful*—In intermittent fevers, dyspepsia, liver complaints, coughs, &c. *Dose*—For an emetic from a teacupfull to a pint of the strong decoction may be taken in two or three doses.

**RUPATORIUM PERFOLIATUM** (*Boneset Thoroughwort*)  
*the leaves and flowers.*

This plant is common to the whole country, and needs no description. The warm infusion of this plant, given in large doses, operates as an emetic—in small doses, frequently repeated, it produces free perspiration. The decoction, taken cold, is both laxative and tonic.

**CEPHALIS IPECACUANHA** (*Ipecac.*)

Ipecac is emetic, expectorant, and diaphoretic—somewhat mild in its operation, but inferior in every respect to lobelia. Combined with lobelia, however, it forms a very good emetic for persons of relaxed habits. Used by injection, it forms a valuable remedy in diarrhœa.

*Dose.*—Half a teaspoonful taken in three portions, fifteen minutes apart.

**SANGUINARIA CANADENSIS** (*Blood Root, Red Puccoon, Indian Paint*) *the root.*

Blood Root is found in all sections of this country, and needs no description.

It is emetic, expectorant, diaphoretic, cathartic, emmenagogue, and styptic.

Its operation as an emetic is harsh, and it should not be employed when other articles of this class can be procured.

## CATHARTICS.

Cathartics are medicines which have a specific tendency to evacuate the bowels downwards, or which, when given in proper doses, excite purging.

PODOPHYLLUM PELTATUM (*Mayapple Mandrake*)—  
*The Root.*

Mayapple is a well known plant, found in great abundance throughout the States, in thick and shady places. The root of this plant is cathartic, alterative and emmenagogue. Its action is mild, efficient, and although sometimes slow, is certain. It has a specific tendency towards the liver, stimulating this organ to an increased and healthy action, and exerts a stimulating effect over the entire glandular system. It is unlike any other cathartic we are acquainted with, as it does not leave the bowels in a costive and a debilitated condition, but, on the contrary, in a soluble state, and, instead of debility, tones up the bowels and invigorates the system.

*Useful*—In liver complaints, dyspepsia, habitual costiveness, depraved appetite, intermittent fevers, scrofulous affections, dropsy, &c.

*Dose* —A teaspoonful every three hours until it operates. It is however best to administer with equal parts of cream of tartar and spear or peppermint, to prevent the griping effects, which all cathartics possess to a greater or less extent.

CONVOLVULUS JALAPA—(*Jalap*)—*the root.*

Jalap is a native of South America. As found in

the shops it is in powder of a light brown color, with but little taste or smell, but a pungent sensation is left in the mouth and throat. It is a good cathartic, but is too griping in its effects to be used alone, and should therefore always be combined with some aromatic stimulant.

*Useful*—In fevers, obstructions of the liver, &c.; but is most advantageously employed in the treatment of dropsies, as it produces copious and watery discharges. It should, however, never be employed in a state of pregnancy, as its drastic effects may produce abortion.

*Dose*—From a half to a teaspoonful in substance, repeated in two hours.

RHEUM—(*Rheubarb*)—*the root.*

Rheubarb is an article which has been long in use, but it is not yet ascertained from which species of *Rheum* it is obtained. Those in our market are known by the name of *Turkey R*, *European R*, and *Chinese R*, the first of which is decidedly the best.

Rheubarb is one of the most valuable articles of this class; it is cathartic, and at the same time astringent; but the cathartic properties are always expended before the astringent effects become sensible.

*Useful*—In flux, dysentery, diarrhœa, infant cholera, cholera morbus, sour stomach, &c.

*Dose*—A teaspoonful repeated as often as the case may require. A very valuable preparation is made by adding equal parts of salacratum and peppermint, the dose of which is the same as above.

CASSIA—(*Senna*)—*the leaves and pods.*

We have a number of different kinds of senna brought to us, which are named after the country from which they are brought. The Alexandria senna is by far the best, and should be used in preference to all others.

Senna is a prompt and efficient cathartic, but is objectionable on account of the griping effects it possesses. This, however, may be obviated to some extent by combining it with some aromatic stimulant.

*Useful*—When administered in conjunction with C. Pink to expel worms in children.

*Dose*—From one to two teaspoonfuls of the powdered leaves in infusion.

ALOE, (*Aloes.*)

A great variety of aloes are brought to us from various parts. The Socotorine aloes, is by far the best.

Aloes is a very certain but slow cathartic and emmenagogue. Its action appears principally to be confined to the lower part of the intestines, and should never be used in pregnancy, nor when the patient is troubled with the piles. Aloes forms the base of most of our patent pills, of which an infinite variety are to be found, but persons should be careful in using such pills, especially if they are pregnant or have piles, as they will universally increase the latter difficulty, and in the former may produce abortion.

*Useful*—in bilious complaints, especially in torpidity of the liver, obstructed menstruation, &c.

*Dose*—from a quarter to half a teaspoonful, repeated in three hours.

LEPTANORIA VIRGINICA · *Black Root, Bowman R. Brinton R. Culvers physic, &c.) The Root.*

Black root is found plentifully in the Western and Middle States, growing in low grounds or moist places, along fences, &c.

This is an excellent cathartic, certain and mild, and is likewise tonic and antiseptic.

*Useful*—in typhus and billious fevers, dyspepsia, liver complaints, &c.; but is most eminently useful in removing costiveness in pregnant women, in which cases it may be used in all stages without the least danger of producing abortion.

*Dose*—a heaping teaspoonful of the powdered root repeated in three hours.

*Bitterroot, extract of butternut, castor oil, &c.,* are good cathartics and may be used as substitutes for any of the foregoing articles.

#### LAXATIVES, OR APERIENTS.

Laxatives are medicines which cause the bowels to move gently.

MENISPERMUM CANADENSIS, (*Yellow Parilla, Moon Seed, The Root.*)

Yellow parilla is found in abundance throughout the Western States. It is an excellent laxative, alterative and tonic.

*Useful*—in habitual costiveness, liver complaints, and diseases of the skin.

*Dose*—a teacupful of the decoction should be taken three times a day, or, which is better, a tablespoonful of the tincture,

SAMBUCUS NIGER, (*Sweet Elder*,) *the Inner Bark and Blossoms*,

Elder is a very good and mild cathartic for children, and is likewise diuretic, and diaphoretic.

*Useful*—in bowel complaints of children, colds, &c.

*Dose*—a half teacupful of the infusion taken in the evening will produce a mild operation in the morning.

AMYGDALIS PERSICA, (*Peach Tree*,) *The Leaves*,

The leaves of the peach tree are laxative, tonic and anthelmintic.

*Useful*—in the treatment for worms, bowel complaints, loss of appetite, and constipation. It is principally used for children. A strong infusion should be taken freely.

*Burning bush, or Wahoo, and Man-in-the-Ground*, are milk laxatives and may be used whenever this class of medicines is indicated.

#### DIAPHORETICS.

Diaphoretics are medicines, which increase the natural transpiration by the vessels of the skin, or in other words which promote perspiration.

ASCLEPIAS TUBEROSA—*White root, Butterfly weed, Milk weed, Pleurisy root—The Root.*

Pleurisy root is a beautiful plant found throughout the States, but most abundantly in the Southern and Western.

It is a mild but certain diaphoretic, producing perspiration without any sensible increase of the circulation. It is likewise a mild expectorant, facilitating rather than producing expectoration, and exerting a soothing and anodyne effect when administered in coughs and consumptions. It has received its notoriety, as well as one of its names, from the decided benefit derived from its use in pleurisy.

*Useful*—in colds, coughs, pleurisy, consumption, &c.

The infusion should be taken freely until the desired effect is produced.

POLEMONIUM REPTANS—*Greek Valerian, Sweetroot, Bluebells—The Root.*

Greek Valerian is an humble plant, delighting in low and wetish places, is however found on high land though sparingly, throughout the Western and Middle States.

The Greek Valerian is a prompt and active diaphoretic, tonic, and slightly expectorant.

*Useful*—in fevers, colds, coughs, consumptions, &c.

*Dose*—half a wine glass full of the tincture three times a day, or in decoction taken freely.

HEDEOMA PULEGIOIDES—*Pennyroyal—the Leaves.*

Pennyroyal is diaphoretic, stimulant, emmenagogue, and carminative, and is extensively used in domestic practice.

*Useful*—in all cases of colds and coughs, and is excellent in removing female obstructions, and in promoting the operation of emetics.

The infusion should be taken freely until a decided impression is made.

ASTROLOCHIA SERPENTARIA—*Virginia Snake Root—The Root.*

This is an excellent diaphoretic, stimulant, carminative and laxative.

*Useful*—in fevers, dyspepsia, habitual costiveness, liver affections, diseases of the skin, and debilitated habits generally.

Take the infusion freely until the desired effect is produced.

*Prickly ash, catnip, sage, and wild chamomile,* are all good diaphoretics, and may be used when others cannot be had.

## ALTERATIVES OR DETERGENTS.

Alteratives are medicines that have a tendency to change diseased conditions of the body, without producing any sensible increase of the evacuations.

SMILAX SARSAPARILLA—*Sarsaparilla—the Root.*

A variety of sasarparillas are found in our market. The American sarsaparilla however is good, and we prefer this to any of the imported articles.

The American sarsaparilla is found in great abundance throughout the Western States delighting in a rich soil, on high lands, in thick and shady woods.

Sarsaparilla is one of the best alteratives we possess, and is likewise tonic and expectorant.

*Useful*—in scrofulous diseases, diseases of the skin, consumption, &c. It should only be used in tincture or alcoholic extract, as water does not extract its virtues, which reside in a resin.

*Dose*—from one to two tablespoonfuls three times a day, or a common sized pill of the extract, morning, noon, and night.

ARCTIUM LAPPA—*Burdock, Clotbur—the Seeds and Root.*

The root of burdock has long been used in decoction, and has acquired a great reputation as an alterative, but the seeds are by far preferable. It may be taken in decoction or in powder. Burdock is powerfully alterative, somewhat diuretic and diaphoretic.

*Useful*—in diseases of the skin, affections of the kidneys, kingsevil, scurvy, and venereal disease.

*Dose*—a teaspoonful of the decoction three times a day, or a teaspoonful of the powdered seeds as often.

ARALIA RACEMOSA—*Spikenard, Spignet, &c.—the bark of the root.*

Spikenard is a luxuriant plant growing throughout the United States, delighting in rich soil, in ravines, along fences, in woods and in select piles of vegetable mould.

The root and berries of spikenard are an excellent alterative, and expectorant.

Useful—in scrofulous habits, female weakness, &c. Spikenard, like sarsaparilla should be used only in tincture, or alcoholic extract.

Dose—from one to two tablespoonfuls of the tincture three times a day. A common sized pill is equivalent to a tablespoonful of the tincture.

RUMEX AQUATICUM—*Waterdock, Narrowdock—the root.*

This plant is found abundantly in the western states, growing only in low and marshy grounds, or along the edges of stagnant pools. It has heretofore been confounded with the Curled Dock, (*Rumex Crispus*,) to which however it bears but little resemblance, and is far superior as an alterative.

The Water Dock is an excellent alterative second to none with which we are acquainted, and is slightly diuretic.

Useful—In scrofulous habits, female weakness, diseases of the skin, &c.

Dose—A teacupfull of the decoction repeated as often as the case may require, or a tablespoonful of tincture, which is preferable.

*Yellow parilla, Sassafras, Black Elder, and Cup plant.* are good alteratives, and may be used as substitutes for either of the foregoing articles.

## EMMENAGOGUES.

Emmenagogues are a class of medical agents that promote the monthly evacuations peculiar to females.

CIMICIFUGA RACEMOSA—*Black Cohosh, Rattleweed, Squaw Root, Black Snake Root—the root.*

This stately plant is found throughout the United States, growing in almost every variety of soil, and in great abundance. It is so well known that a description is unnecessary.

Rattleroot is emmenagogue, anti-spasmodic, anodyne diuretic, diaphoretic, and tonic. It is employed in substance, in decoction, in tincture, and extract.

*Useful*—In female obstructions, coughs, consumption, epilepsy, St. Vitus dance, rheumatism, &c.

*Dose*—Half a teaspoonful of the powder in substance, twice as much made into tea, a tablespoonful of the tincture, or a good sized pill of the extract, three or four times a day. Whenever it is desirable to produce a decided effect, the doses may be increased, or more frequently repeated, until a slight dizziness is produced.

CAULOPHYLLUM THALACTROIDES—*Blue Cohosh, Blueberry—the root.*

This is a well known plant bearing some resemblance to the foregoing, and is found in considerable abundance in most of the western States.

Blue cohosh, is antispasmodic, emmenagogue, nervine, and diaphoretic.

*Useful*—In hysterics, cramp, female obstructions, St. Vitus dance, and to assist in parturition, &c.

*Dose*—Half a teaspoonful or more in substance, or twice as much in decoction.

### RUBIA TINCTORUM—*Madder.*

This is a plant which is much cultivated in Europe as an article of commerce.

Madder is a valuable emmenagogue, and may be employed in cases of female obstructions, with benefit.

*Dose*—A teaspoonful, in decoction, two or three times a day.

### POLYGONUM HYDROPIPEROIDES—*Smartweed—the plant.*

Smartweed is a valuable emmenagogue, antiseptic, diaphoretic, &c.

*Useful*—In female obstructions, and many other diseases.

*Dose*—A teaspoonful of the powder, or the same quantity of the tincture. Scalding destroys its emmenagogue properties. The tincture is the best form in which it can be used.

### LEONURUS CARDIACA—*Motherwort—the plant.*

This well known plant is considered emmenagogue, tonic, &c.

*Useful*—In female obstructions, and weakness.

*Dose*—A wine glass full of the strong infusion, or a table spoonful of the tincture, several times a day.

*Tunzy, wild ginger, and pennyroyal*, all possess emmenagogue properties, and may be used as substitutes for the foregoing articles.

## NERVINES.

These are a class of medical agents that have a specific effect on the nervous system, and chiefly evince their powers in quieting nervous irritation, relieving pain, and stimulating the nervous system to a healthy action.

CYPRIPEDIUM PUBESCENS—*Lady's Slipper, Indian Moccasin, Nervine, Umbil—the root.*

There are many varieties of this beautiful genus found in most of the States. The yellow has been considered the best, but all are generally used indiscriminately. Lady's Slipper is the most valuable nervine we possess, and is somewhat tonic.

Useful—In all nervous affections, hysterics, cramp, colic, fits, delirium, mania, &c.

Dose—A teaspoonful in substance.

ASARUM CANADENSE—*Wild ginger, Coltsfoot, &c. the Root.*

Wild ginger has already been described under the head of stimulants, as one of the best nervines, and second only to Lady's slipper.

HELOXIAS DIOICA—*Star root--blazing star--the root.*

This article has been described under the head of tonics, and is an excellent nervine.

Useful—in female weakness, nervous debility, &c.

Dose—A tablespoonful of the tincture, or a teaspoonful of the powdered root.

SCUTELLARIA LATERIFLORA—*Scullcap, madweed, hoodwort, monkshood, &c.—the root.*

Scullcap is found in most of the states, growing in pasture grounds, along fences, and open woods. This is an efficient and prompt anti-spasmodic it is likewise nervine and tonic.

*Useful*—in St. Vitus dance, spasms, convulsions, colic, nervous debility. It is likewise considered to be a specific against drydophobia.

*Dose*—a wineglass full of the tincture, or a teaspoonful of the infusion.

VALERIANA OFFICINALIS—*English Valerian.*

This is a native of Europe, and can be procured in any of the shops. It is a nervine and anti-spasmodic.

*Useful*—in all cases where this class is indicated.

*Dose*—a tablespoonful of the tincture, or a teaspoonful of the decoction.

*Wild Lettuce, Assafœtida and Ginseng* are all good nervines, and may be used as substitutes for any of the foregoing articles.

#### ANTI-SPASMODICS.

Anti-spasmodics are medicines which overcome irregular nervous action, and thus relieve spasm. They differ from nervines, principally, in their superior power and promptness. They are applicable in all cases of convulsions, fits, cramps, &c.

## LOBELIA.

This article has been described in the class of emetics. It is the most powerful anti-spasmodic known.

*Useful*—In colic, spasms, convulsions, St. Vitus' dance, lockjaw, &c. (*See emetics.*)

*Dose*—Where it is not designed to produce vomiting, a teaspoonful of the tincture, or an equal quantity in some other form should be given and repeated until it nauseates.

SCUTELLARIA LATERIFLORA—*Scullcap, &c.*

Scullcap has been described before, and is an excellent anti-spasmodic. (*See nervines.*)

CAULOPHYLLUM THALACTROIDES—*Blue Cohosh.*

Blue Cohosh has been noticed under the head of emmenagogues. It is an invaluable anti-spasmodic. (*See Emmenagogues.*)

*Wild ginger, Assafœtida, Musk, and English Valerian,* may be used as substitutes, for any of the foregoing articles.

## DIURETICS.

Diuretics are a class of medicines that increase the urinary discharges.

**EUPATORIUM PURPUREUM**—*Queen of the Meadow, Gravel root—the root.*

Queen of the Meadow grows in low and wettish grounds, near streams, but is often found on high land. Found in most of the States. It is an excellent diuretic, stimulant and diaphoretic.

Useful—In the treatment of all diseases of the urinary organs, dropsies, rheumatism, and female weakness and obstructions. It is highly recommended as a solvent for the stone.

To be used freely in decoction.

**ASCLEPIAS FIBROSA**—*Indian Hemp, Silkweed, &c.—the whole plant.*

Indian hemp is found plentifully throughout the States in low and wettish places, and along the banks of streams. It is diuretic, alterative and tonic.

Useful—In fevers, inflammation of the liver, spleen, kidneys, bladder, and is of great advantage in scalding of urine, and female obstructions.

Dose—A pint of the decoction should be taken during the day.

**GALIUM ASPERRELLUM**—*Cleavers, Goosegrass, &c.—the whole plant.*

Cleavers is found in low and wettish places, in meadows, and enclosed woods, in most of the States. It is a good and effective diuretic.

Useful—In strangury, gravel, scalding of urine, gonorrhœa, &c.

*Dose*—A teaspoonful of the cold infusion taken three times a day.

**JUNIPERUS COMMUNIS**—*Juniper*—*The Berries*.

Juniper shrub is an evergreen, growing on dry, barren commons, and hilly grounds, in different parts of the United States, and in Europe.

The berries of juniper are diuretic and stimulant—and when used in large doses sometimes produce a disagreeable irritation in the urinary passages. They may be used in substance, infusion, or in the form of an essence made from the oil.\*

*Useful*—in dropsical complaints, difficulty of urine, &c.

*Dose*—an ounce of the powdered seeds may be put into a pint of boiling water, the whole of which may be taken in the course of twenty-four hours. The essence may be taken in teaspoonful doses.

**LEONTODON TARAXACUM**—*Dandelion*—*The whole Plant*.

Dandelion is diuretic, alterative, tonic, &c. It may

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\* Essences are made by dissolving an ounce or more of the essential oil in a pint of alcohol.

be used in the form of a decoction, an extract; or, which is better, the expressed juice may be employed.

*Dose*—of the expressed juice a tablespoonful several times a day, or a gill of the strong decoction.

*Useful*—in diseases of the urinary organs, liver affections, &c.

Turpentine, Mallows, Watermelon seed, Parsley and Elder, are good diuretics, and may be used whenever this class of medicines is indicated.

# EXPECTORANTS.

These are a class of medical agents which promote the bronchial secretions, and favor their exit from the system by expectoration.

## LOBELIA INFLATA—(See *Emetics*.)

Lobelia has been described as the best of emetics. It is likewise the most efficient expectorant we have any knowledge of.

*Useful*—In asthma, hooping cough, catarrhal coughs, consumptions, inflammation of the lungs [croup, bronchitis, &c.

*Dose*—Half a teaspoonful of the tincture, repeated until nausea is produced.

**ARUM TRIPHYLLUM**—*Indian Turnip, Wakerobin, Wild Turnip, &c.*—The root.

Indian Turnip is found throughout the States in rich soil and in low damp woods. It is an active expectorant.

*Useful*—In coughs, consumptions, &c.

*Dose*—The fourth of a teaspoonful of the powdered root in substance.

ICTODES FOETIDA—*Skunk Cabbage, Swamp Cabbage*—*The root.*

This article is found in all the States, growing in swampy places. It is an excellent expectorant and anti-spasmodic.

*Useful*—in all cases where this class of medicines is indicated.

*Dose*—half a teaspoonful three times a day.

*Wild cherry, Seneca Snake root, Spikenard, and Elecampane* are good expectorants and may be used as substitutes for the foregoing.

#### CARMINATIVES.

Carminatives are a class of medicines which facilitate the expulsion of wind from the stomach and bowels.

ANGELICA ARCHANGELICA—*Masterwort, Garden Angelica*—*The pulverized Seeds.*

This has already been treated of under the head of Emmenagogues. It is a powerful carminative and stimulant.

*Useful*—in all cases of flatulency, colic, cramps, &c.

*Dose*—a quarter of a teaspoonful of the pulverized seeds in substance, repeated every half hour until the desired effect is produced.

ANETHUM FŒNICULUM—*Fennel — The Pulverized Seeds.*

This is an excellent carminative, stimulant, and is slightly diuretic.

*Useful*—whenever this class of medicines is needed.

*Anise, Peppermint, Cinnamon, and Gum Myrrh* are good carminatives, and may be used whenever this class of medicines is indicated.

DEMULCENTS.

Demulcents are a class of medical agents which are capable of shielding sensible surfaces from the action of acrid substances, by covering them with a viscid matter, and rendering the parts more lax and flexible.

ULMUS FULVA—*Slippery Elm—The Inner Bark.*

Slippery elm is the best demulcent we have, and is pleasant and easily procured.

*Useful*—in inflammation of the stomach and bowels, in which cases the mucilage should be taken freely. In the form of a poultice, it is an invaluable application in burns, ulcers, contused wounds, bruises, &c.

CONVALLARIA MULTIFLORA—*Solomon's Seal—The Root.*

Solomon's Seal is found in most of the States, growing in almost every variety of soil. It is an excellent demulcent, alterative and tonic.

*Useful*—in whites, scalding of urine, &c., in which cases it is best used in substance, and should be taken freely. Simmered in lard, it forms an invaluable ap-

plication for piles, giving almost instantaneous relief, and in nine cases out of ten, if persisted in, will effect a cure.

Comfrey, Gum Arabic, Flax Seed, marsh mallows, and Linn Buds, are good demulcents, and may be used as substitutes for the foregoing.

#### MEDICAL FORMULAS.

For the benefit of our readers we give the formulas for making the compounds which have been referred to in the foregoing pages, to which we add a few others that are in common use among botanics.

**COMPOSITION, OR DIAPHORETIC POWDERS.**—Take of bayberry two pounds, ginger one pound, cayenne and cloves of each two ounces; pulverize finely and mix.

*Dose*—a teaspoonful in substance, or made into tea.

*Useful*—in every variety and stage of disease.

**SPICED BITTERS.**—Take poplar bark six pounds, golden seal, cloves, ginger, and prickly ash bark each a pound and a half, balmony a pound, cayenne three quarters of a pound, and loaf sugar seven pounds; mix and sift.

*Dose*—a teaspoonful, three or four times a day, in substance, or in decoction.

*Useful*—in all cases of debility, in recovery from acute diseases, and whenever a medicine is needed to improve the appetite, or strengthen the general system.

**ASTRINGENT TONIC COMPOUND.**—Bayberry two pounds, white pond lilly root, witch hazle, hemlock, or white oak, (inner bark,) cranesbill, and bethroot, each one pound; pulverize finely and mix—*Dose*—same as the foregoing. *Useful*—in hemorrhages, female weakness, dysentery, &c.

**NERVINE TONIC.**—Sculcap and lady's slipper one

pound each, ginseng one half pound; pulverize and mix. *Dose*—same as the foregoing. *Useful*—in nervous weakness, hysterics, palsy, fits, delirium, locked-jaw, &c.

**FEMALE RESTORATIVE.**—Poplar bark ten ounces, balmony, golden seal, unicorn and bethroot, two ounces each, myrrh, cinnamon, and cloves one ounce each, cayenne a half ounce, loaf sugar ten ounces—mix well and sift. *Dose*—a teaspoonful in substance, or made into tea. three or four times a day. *Useful*—in female complaints, general debility, diarrhœa, spitting of blood, during pregnancy, &c.

**FEMALE BITTERS.**—Unicorn, golden seal, poplar bark, ginger, myrrh, cloves, and bayberry, one ounce each, cayenne two ounces, white sugar three pounds. *Use* same as above.

**ANODYNE POWDERS.**—Prickly ash berries and ginger each one ounce. sumach leaves, witch hazel leaves, raspberry leaves, lady's slipper, and blue cohosh, each two ounces; pulverize finely and mix. *Useful*—in menstrual derangements, bearing down, affections of the kidneys, during pregnancy, &c. *Dose*—same as above.

**STIMULATING INJECTION POWDER.**—Bayberry four ounces, senlcap, or lady's slipper, two ounces each, cayenne one ounce, finely pulverized and mixed. *Use*—Steep two teaspoonfuls of the powder in a half pint of boiling water, strain, and administer the fluid milk warm. Valuable, whenever it is necessary to move the bowels. In fevers, or violent attacks of disease, half a teaspoonful or more of lobelia seed may be added to the above.

**ASTRINGENT INJECTION.**—The astringent tonic compound makes an excellent injection for diarrhœa, dysentery, bowel complaints of children, &c.

**COUGH POWDER.**—Beth root, sculcap, and the leaves of boneset, three ounces each, cayenne and lobelia two ounces each; pulverize and mix. *Use*—steep three teaspoonfuls in boiling water twenty minutes, strain, and sweeten with honey, and stir in a teaspoonful of the flour of slippery elm. Of this a half teacupful may be taken five or six times a day. If it produce nausea diminish the dose. Valuable in coughs, hoarseness, whooping cough, soreness of the lungs, &c.

**EXPECTORANT POWDER.**—Skunk Cabbage four ounces, indian turnip two ounces, blood root and lobelia, each one ounce. *Dose*—A teaspoonful in honey or molasses three or four times a day. *Useful*—In the same cases as the foregoing.

**EXPECTORANT SYRUP.**—Elecampane, liquorice root, whiteroot, spikenard equal parts; boil and make a strong syrup. To every gallon add three pints of honey, and one pint, each, of lobelia tincture, and essence of anise. *Dose*—A teaspoonful repeated according to circumstances. *Useful*—In coughs, consumption, &c.

**EMMENAGOGUE SYRUP.**—Wild ginger and balmony each one pound, camomile flowers, seneca snake root, rattleroot, prickly ash berries, and tansy, each one-half pound; make a strong syrup, sweeten with molasses, and add to every gallon a pint of the essence of pennyroyal. *Dose*—Half a wine glass three or four times a day. Valuable in female obstructions.

**ANTI-MERCURIAL SYRUP.**—American Sarsaparilla twelve pounds, guaiac chips eight pounds, blue flag root one and a half pounds, blood root ten ounces. These may be boiled in two or three waters, and all reduced to ten gallons. To this add, when cold, eight gallons of molasses, and five ounces of the oil of sassafras. *Dose*—For an adult, a wine glass half full,

half an hour before each meal. *Useful*—In all cases where a cleansing medicine is needed—as in scrofula, mercurial disease, &c.

**FEMALE STRENGTHNING SYRUP.**—Comfrey four ounces, elecampane two ounces, hoarhound one ounce, water three quarts, boil to three pints, strain, and add, while warm, an ounce of beth root finely pulverized, a pint of brandy and a pound of sugar. *Dose*—A wine glass half full three or four times a day. *Useful*—In female weakness, bearing down, leucorrhoea, barrenness, &c.

**MOTHER'S RELIEF.**—Partridgeberry vines two pounds, high cramberry barks and unicorn one-half pound each, blue cohosh one-fourth pound, flax seed and red raspberry leaves one pound each,—pulverize and boil in three gallons of water, strain and simmer down to a gallon and a half—add four pounds loaf sugar, and a half gallon Holland gin. *Dose*—A wine glass half full three or four times a day. Unequalled as a remedy during pregnancy—to render easy and safe the process of parturition. The use of this medicine should be commenced two or three weeks before confinement.

**HYDRAGOGUE TINCTUE.**—Bark of sweet elder one pound, wine a gallon—simmer an hour, strain and bottle. *Dose*—A wine glass full three time a day.—*Useful*—In dropsical affections.

**BUTTERNUT SYRUP.**—Take butternut bark cut into slips, bruise with a hammer, pack close in an earthen vessel, pour on boiling water, cover closely, place the vessel on coals near the fire and simmer four hours.—Then strain, add molasses enough to make a syrup, and one-fourth the quantity of proof spirits to preserve it *Dose*—For a child, from one to two teaspoonfuls every half hour or hour until it operates. *Useful*

—As a physic for children in bowel complaints, worms, &c.

**CAYENNE PILLS.**—Cayenne any desirable quantity, form into pills with the mucilage of slippery elm. *Dose*—two or three pills, several times a day. *Useful*—Whenever a stimulant is needed.

**EMMENAGOGUE PILLS.**—Extract of smartweed and tansy equal parts, thicken with equal parts of black cohosh and cayenne, and form into pills. *Dose*—two or three pills, several times a day. *Useful*—In obstructions of the menses.

**STOMACH PILLS.**—Lobelia seeds, cayenne, and scul-cap, equal parts—pulverize finely, and form in pills with the mucilage of slippery elm. *Dose*—One or two pills may be taken every two hours—or from three to five at bed time. *Useful*—In hoarseness, tightness of the breast, coughs, croup, dyspepsia, liver complaints, &c.

**SUMACH PILLS.**—Sumach gum, and fir balsam, equal parts—pulverized loaf sugar enough to form them into pills. *Useful*—In leucorrhœa, strangury, scalding of the urine, &c. *Dose*—One or two pills three times a day.

**LAXATIVE TONIC.**—Poplar bark, golden seal, barberry, colombo root, and bitter root, or black root, each one pound—cayenne and cloves of each half a pound, loaf or lump sugar, as much as all the rest, pulverize and mix. *Useful*—In liver complaints, indigestion, &c. *Dose*—A teaspoonful three times a day.

**VEGETABLE (CATHARTIC) PILLS.**—Mandrake root one pound, soccotrine aloes one half pound, blood root four ounces, cayenne two ounces, lobelia seeds one ounce, Pulverize and mix with butternut extract, and

form into pills. *Useful*—In fever and ague, bilious fever, jaundice, bilious colic, liver complaint, dropsy, sick headache, &c. *Dose*—Two every four hours until they operate, or four on going to bed.

**VEGETABLE PHYSIC.**—Alexandria senna two pounds, jalap and peppermint one pound each. Pulverize and mix. *Dose*—a teaspoonful. *Useful*—Whenever a physic is needed.

**TINCTURES.**—These are prepared by macerating medical substances in alcohol. The articles tintured should be bruised fine, or powdered, when they may be placed in some convenient vessel, and the alcohol added—after which the vessel may be closely stopped, and occasionally shaken, for ten days or two weeks. when the tincture may be strained off, and bottled for use. As a general rule a fourth of a pound of the medicine is the proportion for a quart of alcohol. Some of the balsams and gums require a larger proportion of alcohol.

**NERVINE TINCTURE.**—Sculcap, and lady's slipper, four ounces each, ginseng two ounces, wine a quart. *Useful*—In hysterics, and other nervous affections. *Dose*—A teaspoonful or more.

**NUMBER SIX.**—Myrrh twelve ounces, cayenne one ounce, prickly ash berries two ounces, sculcap four ounces, peach meats four ounces, alcohol one gallon. These should be put into some convenient vessel and shaken several times a day for ten days, after which the liquid may be poured off and bottled for use. *Useful*—in feeble and languid states of the system, colic, hysterics, rheumatism, hemorrhage, mortification, and in all violent attacks of disease. *Dose*—A tablespoonful more or less, according to circumstances.

**THIRD PREPARATION OR ANTI-SPASMODIC TINCTURE.—**

Lobelia seeds finely pulverized one pound, cayenne and sculcap four ounces each. Digest for ten days in a closely stopped vessel, shaking it up two or three times a day. This is the best anti-spasmodic known and is consequently useful in convulsions, fits, locked jaw, suspended animation, palsy, &c. Dose—a teaspoonful or more according to circumstances.

**STIMULATING LINIMENT.**—Alcohol one quart, cayenne and camphor one fourth pound each, turpentine one gill. Shake together in a closely stopped vessel for several days. *Useful*—in rheumatism, pains in the breast or side, swellings, sprains, bruises, &c.

**ANOTHER.**—Tincture smartweed, tincture cayenne, and uncture lobelia equal parts.

**ANOTHER.**—Alcohol one quart, camphor, oil origanum and spirits of turpentine two ounces each, carbonate of ammonia one ounce.

**HEALING SALVE.**—Beeswax and salt butter one pound each, turpentine eight ounces, balsam of fir twelve ounces. Simmer together and strain. Good to heal fresh wounds, burns and other sores.

**STRENGTHENING PLASTER.**—Rosin a pound and a half, beeswax, burgundy pitch, and lard two ounces each. Melt, add half a gill of tincture of cayenne, or No. 6, and a quarter of an ounce, each, of sweet oil, sassafras oil, and camphor. When the whole are thoroughly incorporated, pour into cold water, and work the mass with the hands as a shoemaker works his wax. If the mass is too soft add more rosin, if too hard add more lard. *Useful*—in weak back, breast, or loins. It should be spread on leather and worn over the affected part.

**NEUTRALIZING MIXTURE.**—Rheubarb a large tea-

spoonful, salærated and pepperment the same, boiling water half a pint. Sweeten with loaf sugar. *Dose*—from a teaspoonful to a tablespoonful every half hour or hour until it operates. Excellent in cholera morbus, diarrhœa, dysentery, summer complaint of children, &c.

**ANTHELMINTIC OIL.**—Caster oil one pint, wormseed oil, two ounces, oil of anise one ounce, spirits of turpentine one ounce. Shake well together. *Dose*—for a child a teaspoonful every two hours until it operates. Good to expel worms.

**STIMULATING BALSAM.**—Essence of anise, sassafras, peppermint, pennyroyal, tincture gum guaiacum, and tincture cayenne, one pint each, tincture of myrrh one half pint, sugar house molasses three quarts. Shake well together. *Dose*—from one half to a whole table spoonful from three to ten times a day. Excellent in pains in the chest, side, &c.; also in coughs, colds, hoarseness, difficult breathing, flatulency, pains in the stomach or bowels, loss of appetite, &c.; also, valuable in painful menstruation, and other female difficulties.

**BALSAM OF HONEY.**—Tincture of lobelia one quart, essence of anise & sassafras four ounces each, strained honey twelve ounces. Shake together. An excellent emetic for children, good in croup, whooping cough, difficult breathing, and in restlessness of children. *Dose*—a teaspoonful.

**EXTACTS.**—These are made by boiling the substances from which they are made in water until the strength is extracted, and then evaporating the fluid down to the consistence of tar. Sarsaparilla, Spikenard, and some other articles, should be boiled in whiskey. Great care should be taken in evaporating the quids, or they will become burned, and thus have their properties destroyed.

## GLOSSARY.

- Adomen*, The belly.
- Abnormal*, Unnatural, irregular.
- Abortion*, The premature expulsion of the fœtus from the womb.
- Abscess*, A tumor containing pus, or a collection of matter.
- Accoucheur*, A person who assists women in childbirth.
- Acids*, Sour; that which imparts to the tongue a sharp or sour taste.
- Acrid*, Sharp, burning, or pungent.
- Acrimony*, Sharpness, corrosiveness.
- Alkali*, Substances which neutralize acids, such as soda, potash, &c.
- Alteratives*, Medicines capable of changing the condition of the system without producing any sensible increase of the evacuations.
- Amnion*, The external membrane which surrounds the fœtus in the womb.
- Anasarca*, Dropsy of the cellular membrane.
- Anodynes*, Substances which relieve pain.
- Antacids*, Alkalies.
- Anthelmintics*, Medicines which destroy or expel worms.
- Antiseptics*, Medicines that guard against mortification.
- Antispasmodics*, Medicines which relieve cramps or spasms.
- Anus*, The fundament.

- Aperient*, That which gently opens the bowels.
- Apoplexy*, A sudden deprivation of all the senses and voluntary motion.
- Aphthæ*, The thrush, or canker sore mouth.
- Areola*, A small brown circle which surrounds the nipple.
- Ascites*, Dropsy of the belly.
- Astringents*, Medicines which bind or contract.
- Catamenia*, The monthly evacuations peculiar to females.
- Cancer*, A painful ulcer exuding a corroding sanies.
- Canula*, A small metallic tube.
- Carminatives*, Medicines which expel wind.
- Cathartics*, Medicines which evacuate the contents of the bowels.
- Catheter*, A small tube designed for drawing the urine.
- Cerebral*, Appertaining to the brain.
- Cervix Uteri*, The neck of the womb.
- Chlorosis*, Green sickness.
- Chorion*, The external membrane which surrounds the amnion.
- Chronic*, A term applied to diseases of long standing.
- Cicatrix*, The seam or scar after the healing of a wound or ulcer.
- Coition*, Intercourse between the sexes, copulation.
- Colon*, the large intestine.
- Congenital*, Born together : a disease or defect existing from the time of birth.
- Congestion*, An unnatural collection of blood in any part.
- Constipation*, Costiveness.

*Cutaneous*, Belonging to the skin.

*Cutis*, The skin.

*Cyst*, A bladder.

*Decoction*, A Medicine prepared by boiling.

*Delerium*, Roving in mind; lightheaded; disordered intellect.

*Demirep*, A woman of doubtful chastity.

*Demulcents*, Soothing, lubricating and mucilaginous remedies.

*Dentition*, Teething.

*Diaphoretics*, Medicines which "promote perspiration.

*Digestion*, The conversion of food into chyme, or the process of dissolving aliment in the stomach, and preparing it for nourishment.

*Diuretics*, A class of medicines which produce an increased flow of urine.

*Dyspepsia*, Indigestion.

*Emaciation*, A falling away of the flesh, "leanness.

*Embryo*, The first rudiments of an animal in the womb before the several members are distinctly formed; after which it is called a foetus.

*Emmenagogues*, Medicines which promote the menstrual discharges.

*Emetics*, Medicines which produce or excite vomiting.

*Emollients*, A class of agents which render parts more pliable and soft.

*Encysted*, Enclosed in a bag or bladder.

*Enema*, An injection.

*Erratic*, Wandering irregular.

*Erysipelas*, Inflammation of the skin; St. Anthony's fire.

*Euthropics*, See Alteratives.

*Excitants*, *Stimulants*.

*Excoriation*, The removal of the skin by means of acrid substances ; to galling.

*Expectorants*, That class of medicines which favor discharges from the lungs.

*Excrements*, Matter thrown from the animal body after digestion.

*Febril*, Pertaining to fever.

*Fætal*, Pertaining to a fœtus.

*Fætid*, Having an offensive smell.

*Fœtus*, The child in the womb of its mother, after it is perfectly formed ; before which it is called, embryo.

*Fomentations*, Warm applications.

*Fontanel*, An interstice between the bones of the head of infants.

*Function*, The office of any particu'ar part of animal bodies.

*Fundus*, The Upper part of the womb.

*Funis, Umbilicus*, The naval cord.

*Gangrene*, The first stage of mortification.

*Genital*, Relating to organs peculiar to males or females.

*Germ*, The ovary or seed-vessel.

*Gestation*, Pregnancy from the time of the beginning to delivery.

*Gravid*, Pregnant.

*Hemorrhage*, An unnatural flow of blood.

*Hernia*, Rupture.

*Idiopathic*, A disease is idiopathic when it has an independent origin—not symptomatic.

*Imperforate*, Not perforated ; not having holes.

*Impregnation*, The act of making pregnant.

*Indigestion*, A want of power in the stomach to prepare the food for nourishment.

*Infusion*, A tea ; a medicine prepared by pouring boiling water on it.

*Labia*, Lips.

*Lactation*, The time of sucking.

*Laxatives*, Mild purgative medicines.

*Lesion*. An injury or wound.

*Leucorrhœa*, The whites.

*Ligature*, The thread or cord by which anything is tied.

*Lochia*, The discharges of females from the uterus after parturition.

*Lumbar*, Pertaining to the loins.

*Lymph*, A pale rose-colored fluid contained in the lymphatic vessels.

*Maformation*, An irregular formation—not natural.

*Materia Medica*, The various substances used as medicines.

*Meconium*, The green discharges from the bowels of the fœtus, thrown off shortly after birth.

*Membrane*, A thin expanded substance, composed of cellular texture.

*Mucus M.* A membrane which secretes a viscid fluid or mucus.

*Serous M.* A membrane which secretes a thin watery fluid or serum.

*Morbid*, Diseased ; unhealthy.

*Mortification*, The death and consequent putrification of any part of the body.

*Mucilage*, A watery solution of gum ; as gum arabic dissolved in water.

*Nausea*, Sickness at the stomach; inclination to vomit.

*Nervines*, Medicines which allay nervous irritability.

*Neuralgia*, Painful affection of the nerves.

*Normal*, Regular, natural.

*Os*, 1. Bone. 2. Mouth.

*Os Exterum*, The entrance into the vagina.

*Os Uteri*, Mouth of the womb.

*Ova*, An egg.

*Ovaries*, The stock or bunch of eggs or seed vessels in females.

*Palpitation*, A convulsive motion of the heart.

*Paralysis*, Palsy ; the loss of the power of muscular motion.

*Paroxysm*, An increase or aggravation of the symptoms of disease, which last a certain time and then subside.

*Parturition*, Childbirth ; the act of bringing forth, or of being delivered of child.

*Peritoneum*, The membrane which surrounds all the abdominal organs.

*Peristaltic motion*, The vermicular motion of the intestines.

*Phlegmasia*, An inflammation.

*Phlegmasia dolens*, White leg ; milk leg.

*Placenta*, The afterbirth.

*Plastic*, Having the power to give form or fashion to matter.

*Polypus*, A tumor with a narrow base resembling a pear.

*Post mortem*, After death.

*Posterior*, Behind.

*Perforate*, To bore through; to pierce; to make a hole into.

*Prolapsus ani*, Falling of the fundament.

*Prolific*, Fruitful.

*Puerperal*, Appertaining to child bearing.

*Purgatives*, Medicines which produce active evacuations of the bowels.

*Puriform*, Like pus; in the form of pus.

*Purulent*, Pertaking of the nature of pus.

*Pus*, The white or yellow matter which generates in wounds, ulcers, &c.

*Pustules*, A pimple; a small tumor.

*Rectum*, The lower part of the intestines.

*Rigors*, A sense of chilliness, with shuddering.

*Scirrous*, Indurated, hard. Knotty.

*Scirrhus*, A hard tumor which frequently turns into cancer.

*Secretion* The act of producing specific collections from the circulating mass, as the bile, saliva, mucus, &c.

*Secundines*, The afterbirth and its appendages.

*Serum*. The thin or watery part of the blood; also the same part of milk.

*Sloughing*. Separating a dead part, by a running or dissolving process.

*Spasm*, An involuntary contraction of the muscular fiber.

*Spasmodic*, Consisting of spasms.

*Spermatozoa*, Small animacula found in the semen.

*Sterility*, Barrenness.

*Stimulants*, Medicines which stimulate or excite.

*Stricture*, The constriction of a passage.

*Superfætation*, The impregnation of a women already pregnant.

*Suppuration*, The process by which puss is formed.

*Symptoms*, External signs by which diseases may be known.

*Syncope*, Fainting.

*Tenia Capitis*, Scalled head.

*Tissue*, Texture ; a general name for parts.

*Tumify*, To swell.

*Turgescence*. A full state of the vessels.

*Typhoid*, A term applied to a low grade of fever.

*Ulcer*, A sore that discharges pus.

*Ureters*, The tubes that convey urine from the kidneys to the bladder.

*Uterine*, Pertaining to the womb.

*Uterus*, The womb.

*Vagina*, The sheath or passage to the womb.

*Varicose*, Knotty.

*Vascular*, Pertaining to vessels ; full of vessels.

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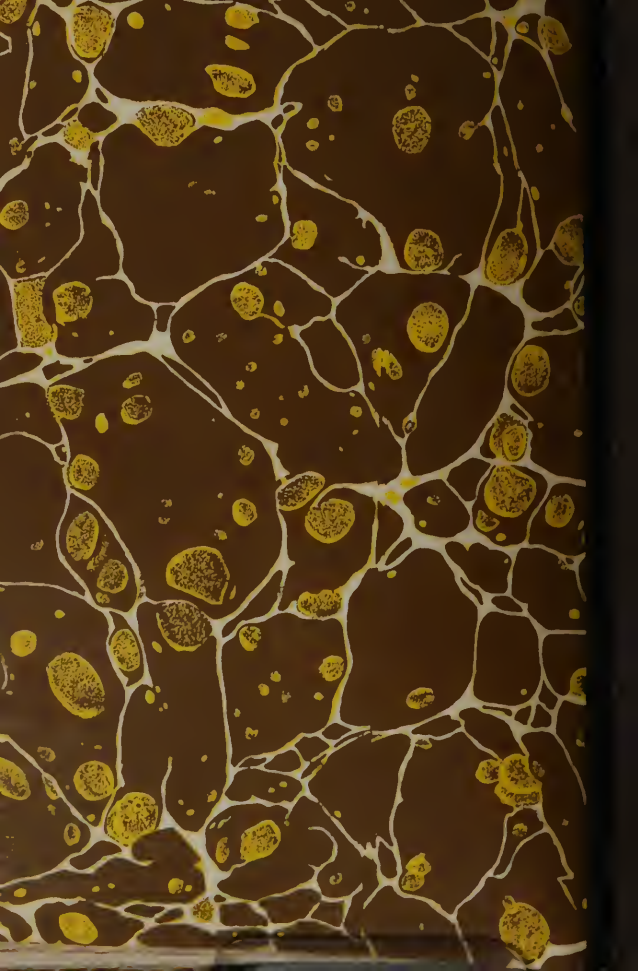
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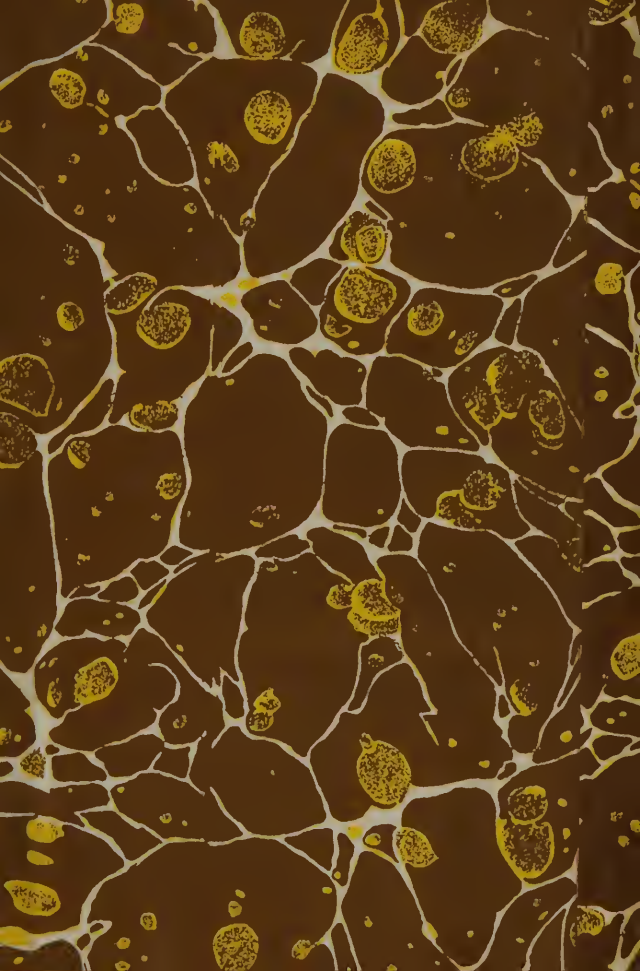
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